

Practice Recovery Check List

There is no single practice experience on the road to recovery from Covid-19. Use this checklist to identify any outstanding items you can proactively address now to ensure that your practice is ready as your market/region starts a gradual return.

1. Are you sequencing available clinical services or opening all services at once?

- ☐ Review current city, state, and national rules or guidance on the types of services that can be offered to patients
- ☐ Evaluate current staff availability and practice resources (see below) to determine if the full compliment of practice clinical services can be resumed or needs to be phased

2. Do you have enough PPE?

- ☐ Audit current PPE supplies, including N95 masks, surgical masks, gloves, hand sanitizer, and disinfecting wipes
- ☐ Review practice operations to ensure appropriate use, identifying opportunities to conserve supplies
- ☐ Confirm your ability to order new supplies and anticipated delivery timelines
- ☐ Create back up plans for sourcing supplies
- ☐ Create back up plans for prioritizing clinical services if supplies become limited including how you will communicate to patients and staff if supply shortages force changes to operations

3. Is your waiting room social distancing compliant?

- ☐ Evaluate waiting room to ensure six feet between patients (consider options such as: rooming patients directly, having patients wait in their car in the parking lot, or establishing dedicated space or appointment times for high risk groups)
- ☐ Review process for rooming patients and moving patients around the practice to maintain social distancing with other patients
- ☐ Audit places where patients congregate – check in, check out/billing – to ensure social distancing and limited shared resources (i.e. pens, clip boards, electronic devices)
- ☐ Write up patient-facing material to share in advance about changes in operations, including any steps patients can take before coming in (such as answering screening questions)

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4. What is your new screening protocol at the front door (including Covid-19 testing)?

- ☐ Establish new protocols for patient arrival including, but not limited to,
 - ☐ Signs outside the practice/on the door if patients are experiencing symptoms
 - ☐ Taking patient's temperature at the door/upon arrival
 - ☐ Screening questions
- ☐ Identify standard protocols for how to turn symptomatic patients away so staff are consistent in criteria and communication
- ☐ Communicate with patients in advance to normalize new screening protocols
- ☐ Outlining plans for sharing responsibility for roles/responsibilities with higher risk to exposure
- ☐ Outlining Covid-19 testing plan if organizations have access to tests

5. How are you communicating with all of your patients?

- ☐ Identify ways to proactively communicate:
 - ☐ Process changes, such as screening at the door and/or screening in advance of a visit, online check-in and new policies for caregivers in the office
 - ☐ How the practice is supporting social distancing and other steps the practice is taking to protect the health of patients and staff, such as elevated cleaning protocols
 - ☐ Considerations for higher-risk patients before coming in
 - ☐ New telehealth options and how to make the most of a telehealth visit
 - ☐ Financial resources available to patients and/or price transparency for patients experiencing financial insecurity
 - ☐ Scheduling for previously cancelled/deferred visits

6. Are you anticipating longer pre-visit chart review and patient visit times?

- ☐ Review current pre-visit chart review process to capture Covid-19 delays to care
- ☐ Outline how pre-visit planning will be different for telehealth visits recognizing that some chart reviews will surface care needs that require an in-person visit
- ☐ Prioritize pre-visit chart review items based on what is critical to address immediately and/or tradeoffs in what can be done virtually vs in person
- ☐ Create/update frequently asked questions and patient facing material including:
 - ☐ Steps patients can take to avoid Covid-19
 - ☐ Steps patients should take if they (or a member of their household) are experiencing symptoms that might be Covid-19

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6. Are you anticipating longer pre-visit chart review and patient visit times? (continued)

- ☐ Review current behavioral health screening steps, recognizing that there will likely be an uptick in the need for behavioral health services (and review available behavioral health services in your community – especially new telebehavioral health options – to ensure patients in need of services can be referred appropriately)
- ☐ Evaluate how the practice will surface delayed or deferred care from patient perspective during periods of social distancing/stay at home
- ☐ Plan for longer intervals between patients to allow for appropriate cleaning

7. Are you emailing physicians and practices that refer to you?

- ☐ Identify ways to proactively communicate:
 - ☐ Plan to bring back cancelled/deferred patients
 - ☐ Overview of any office changes including screening at the door, online materials for checking in and/or screening in advance of a visit
 - ☐ Overview of how practice is supporting social distancing and other steps the practice is taking to protect the health of patients and staff
 - ☐ Considerations for higher-risk patients, including when to proceed or delay
 - ☐ What procedures or services must be done in office vs. are available via telehealth

8. How are you normalizing and expanding telehealth services?

- ☐ Outline new strategic plan for telehealth services including clear guidance around services that are now offered primarily via telehealth, limited via telehealth, and not offered via telehealth
- ☐ Create a prioritized plan for rolling out new telehealth services
- ☐ Evaluate forums or other feedback loops for quickly sharing telehealth best practices within the practice, as well as lessons learned
- ☐ Evaluate how current in office practices (e.g. pre-visit chart review, staff huddles) should account for patients “visiting” the practice electronically

9. How are you transparently communicating with staff during recovery?

- ☐ Revisit current communication channels and forums to update staff about recovery plans, anticipated timelines
- ☐ Revisit forums for staff to provide feedback and stories about what is working and what is not
- ☐ Create forums for addressing rumors both about the practice and Covid-19
- ☐ Implement additional safeguards for staff resilience and burnout (see checklist in appendix)
- ☐ Prepare to answer questions about how practice decisions were made in the first wave of Covid-19 and will be made if there is a second wave (particularly around furloughing staff, cutting hours, or changing compensation)

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9. How are you transparently communicating with staff during recovery? (continued)

- ☐ Prepare to address staff concerns about exposure to Covid-19
- ☐ Prepare to support staff processing their role in responding to Covid-19, including testing/screening, shifting their site of care, providing care to Covid-19 patients, and losing patients to Covid-19
- ☐ Proactively communicate changes to HR policies related to PTO, absenteeism, flex scheduling, etc. post-Covid and establish a channel for questions and feedback

10. Are you making adjustments to 2020 projections inline with an economic downturn?

- ☐ Review steps the practice took in 2009 in the face of the last economic downturn, including:
 - ☐ Impact on demand for specific services within the practice
 - ☐ Impact on out-of-pocket payment from patients
 - ☐ Impact on referrals to the practice
- ☐ Review possible cost cutting measures now, and plan a phased approach for when to deploy/implement those measures

11. Are you ready for a second wave and/or rolling restrictions on essential services?

- ☐ Plan for how the practice would respond to a second wave of Covid-19 in the Fall/Winter to taper services, staffing, and prepare for another pause of non-essential services
- ☐ Review what happened with the first wave to identify what the practice would want to do again, and what the practice would want to do differently, amid a second wave
- ☐ Plan for how the practice would recover after the second wave and identify what practice would want to do again, and what the practice would want to do differently to recover after a second wave
- ☐ Identify what metrics would be early indicators that the practice should implement the plan
- ☐ Identify what metrics would be early indicators to begin round two of practice recovery

12. How will you communicate about a positive Covid-19 test from a patient or staff member?

- ☐ Prepare a plan for what the practice would do if a patient tested positive for Covid-19 after a visit to the practice including communication with staff and patients, and any additional cleaning needs

Appendix

Starter list: support frontline staff during Covid-19 crisis



Expand access to opt-in emotional support services

- Set up confidential mental health support for frontline workers. When staff call in, connect them to targeted internal or external behavioral health support services.
- Provide virtual drop-in sessions or "office hours" with staff from your organization who have expertise in providing mental and emotional support.
- Offer virtual one-on-one or group moral distress consults with a trained facilitator.



Strengthen peer networks with formal support systems

- Run virtual peer "support sessions" once a week where a moderator prompts staff to discuss their personal and professional concerns with a small group of peers.
- Set up a buddy system. Partner junior frontline staff or clinicians taking on critical care patients for the first time with more tenured team members to get advice and voice concerns.
- Encourage staff to share stories of providers going above and beyond the call on a public forum.



Create space for staff to decompress—even if just for a moment

- Allocate a quiet, dedicated space in your facilities where providers can go to decompress for a few minutes during their shift.
- Start team meetings or huddles by having a staff member share a [90-second uplifting story](#) that exemplifies one of their core values.
- Create "bounce back kits" with items like a reflection exercise, earplugs, etc., and store them in a central location so staff can access them in moments of distress.
- Encourage staff to bring mementos that remind them of positive times—like photos of their family—to store in their locker and glance at when they're feeling overwhelmed.
- Provide onsite or virtual meditation for staff.



Take care of the necessities so staff can focus on caring for patients

- Launch a "care and share" website where community members can volunteer to help staff with tasks like grocery shopping and childcare.
- Partner with organizations providing free meals to health care staff, like [Sweetgreen](#) and [UberEats](#)—and when possible, order and encourage group meals.
- Connect staff to alternate housing options if they're worried about exposing their family to COVID-19. Hotels like the NYC Four Seasons have offered up space to health care workers in need.



Widely share resources that staff can tap into on their own terms

- Share open online resources on coping with anxiety and stress with frontline staff, such as Headspace's [meditation sessions](#) or the NHS in Mind's [free videos](#) with eight techniques for coping with anxiety and stress.
- Send out weekly "wellbeing" email updates to the organization where staff can access centralized information on mental health and support services—or include a daily reflection in a standing COVID-19 newsletter.