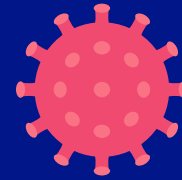# COVID-19
(Coronavirus)

Prepare to Care: Guidance for Health Care Professionals

This guidance provides basic information only. It is not intended to take the place of medical advice, diagnosis, treatment or legal advice. Health care Professionals are encouraged to use their professional judgment to determine when and how to provide care, with the understanding this is not the optimal environment, for everyone involved.

Prepare your business for COVID-19

1. **Stay informed about the spread of COVID-19.**

   - For the latest Bermuda COVID-19 updates and details, please refer to **Bermuda Government website**.

   - Information and resources around COVID-19 continue to develop. The latest information & resources can be found on the following websites:
     - **Center for Disease Control and Prevention**
     - **World Health Organisation**

2. **Develop a plan to manage your business through the new and unique operational challenges of COVID-19.**

   - Actively screen everyone (staff, clients and visitors) for symptoms of COVID-19 *before* they enter your business.
     - The Bermuda Hospital Board has developed a **screening tool** that can be used to help identify individuals who may have been infected and reduce the potential risk of exposure to you, your staff and clients.

   - Establish reporting procedures within your business.

   - Know which of your clients are at higher risk of adverse outcomes from COVID-19. You may want to take extra precautions when they come into your business.

   - Assess current and future personal protective equipment (PPE) supply needs to ensure you are prepared.

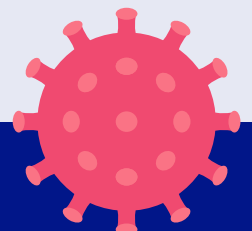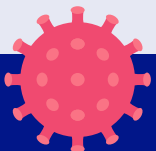   - Communicate your COVID-19 preparedness plan with your staff.

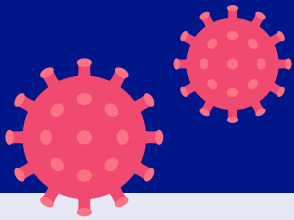3. **Develop a plan to manage an outbreak at both the business and community level.**

   - Develop COVID-19 specific policies and procedures. Include a process to step up precautions when the virus is spreading in the community.

   - Prepare for exposure incidents. Develop a plan to screen symptoms and evaluate staff members.

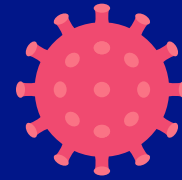4. **Communicate COVID-19 business guidelines and procedures to your employees.**

   - Set up employee guidance on using PPE (i.e. ensure employees know the right ways to put on, use and take off PPE safely).

   - Ensure employees are aware of the correct procedures on how to manage patient visits.
     - Recognize the symptoms of COVID-19.
     - Handling of phone calls and walk-ins.
     - Clean gloves to be worn during and discarded after payment transactions.
     - Emphasize hand hygiene and cough etiquette.

   - Advise employees on circumstances under which they should not report to work.

   - Identify whom they should contact if they need to be absent for a COVID-19 related reason, and specify any leave available to them in the event of a COVID-19 related absence.

   - Minimize staff in the office. Consider what tasks can be done from home or outside of regular hours to minimize staff interactions with each other and clients.

   - Communicate a plan for how your business will keep running if you are short on staff (closures of schools

Stay informed on the latest developments about COVID-19 by visiting the Government of Bermuda's website coronavirus.gov.bm

GOVERNMENT OF BERMUDA
Ministry of Health

Bermuda
Health Council

Version 1: 5th May 2020

and limited public transportation may affect your staff's ability to report to work).

- Provide self-care and mental health resources to your staff.

5. Communicate with your clients.

- Create an external communications plan for updating patients on office changes.

- *Prior to office visit*, communicate your COVID-19 preparedness plan with your patients (e.g. inform patients of screening measures, face covering requirements and limit non-client visitors, when possible).

- Post signs at entrances and in waiting areas about prevention actions.

6. Prepare the waiting area and treatment rooms.

- Minimize the need for patients to wait in the waiting room (e.g. Spread out appointments, when possible, have clients wait outside the building until the room is ready for them).

- Provide supplies – tissues, alcohol-based hand sanitizers, soaps at sinks, and trash cans.

- Place chairs 3-6 feet apart, when possible. Use barriers (like screens), if possible.

- Remove all communal objects (e.g. reading materials, toys) out of waiting room.

In-Person Care

- Non-medical health care providers should not be treating symptomatic people (or people who are a suspected or confirmed case of COVID-19). Asymptomatic individuals should also be considered.

- Be ready for patients who may come to your practice without an appointment.

- Any visitor who is coughing or showing signs of illness should be placed in a private treatment room as quickly as possible.

After Patients Leave

- Clean/disinfect high touch surfaces. Treatment areas

and equipment used during visit should be cleaned before another client is brought into the treatment area or used by a colleague.

- Thoroughly clean facilities at the end of each day.

Screening

Active:

- Clients should be screened over the phone for symptoms of COVID-19 before scheduling appointments.

- Where clients present in-person without phone screening, staff should screen patients upon entry to assess for symptoms and exposure history.

- For reference, a full list of common COVID-19 symptoms is available on the Bermuda Hospital Board website, here.

- Staff conducting screening on site should ideally be behind a barrier OR staff should maintain a 6ft (2m) distance from the client to protect from contact/droplet spread. Providers who do not have a barrier and cannot maintain 6ft (2m) distance should use contact/droplet precautions. This includes the appropriate PPE (gloves, gown, a surgical/procedure mask, and eye protection).

Passive:

- Where possible, have signage outside the office asking patients to call before entering to allow for appropriate screening and direction.
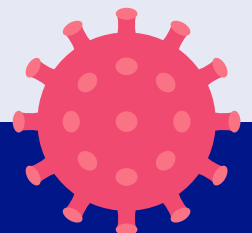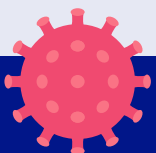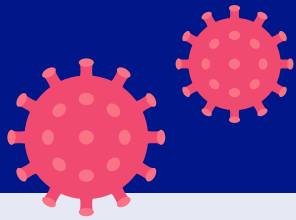
Positive Screening: What to do

Positive Screening over the phone

A client who screens positive for symptoms of COVID-19 over the phone should be directed to call their primary General Practitioner (GP), the COVID-19 helpline at 444-2498 or the Emergency Department at 239-2009 for advice.
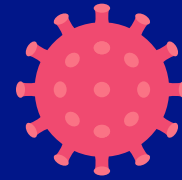
Positive Screening in the office

Clients who screen positive for symptoms when in the office should be moved to a private room (do not cohort with others). If it is not possible to move a client to a private room, the client should be instructed to remain/return to their vehicle. The client's GP should be contacted immediately or call the COVID-19 helpline at 444-2498.

COVID-19
(Coronavirus)

If a client presents with severe symptoms call the Emergency Department at 239-2009 for advice.

Clients who screen positive for symptoms **should not** be instructed to go directly to the hospital.

Potential Case Screening Questions

Click here for a symptoms checklist

Additional Resources:

- Checklist to prepare physician offices for COVID-19: Link
- COVID-19: Resources for professionals: Link
- Criteria for Return to Work for Healthcare Personnel with Suspected or Confirmed COVID-19 (Interim Guidance): Link
- Guidance for employers and businesses on coronavirus (COVID-19): Link
- OSHA Guidelines for preparing workplaces for COVID-19: Link
- PPE for healthcare workers: Link
- Recommended PPE for Allied Health Professionals: Link
- Tips for keeping your practice safe and mitigating the spread of COVID-19: Link
- Waiting room app: Link

Use Personal Protective Equipment (PPE) When Caring for Patients with Confirmed or Suspected COVID-19

Before caring for patients with confirmed or suspected COVID-19, healthcare personnel (HCP) must:

- **Receive comprehensive training** on when and what PPE is necessary, how to don (put on) and doff (take off) PPE, limitations of PPE, and proper care, maintenance, and disposal of PPE.
- **Demonstrate competency** in performing appropriate infection control practices and procedures.
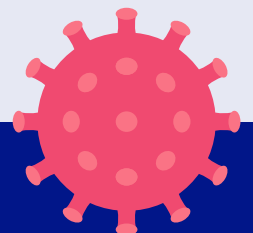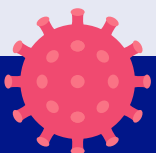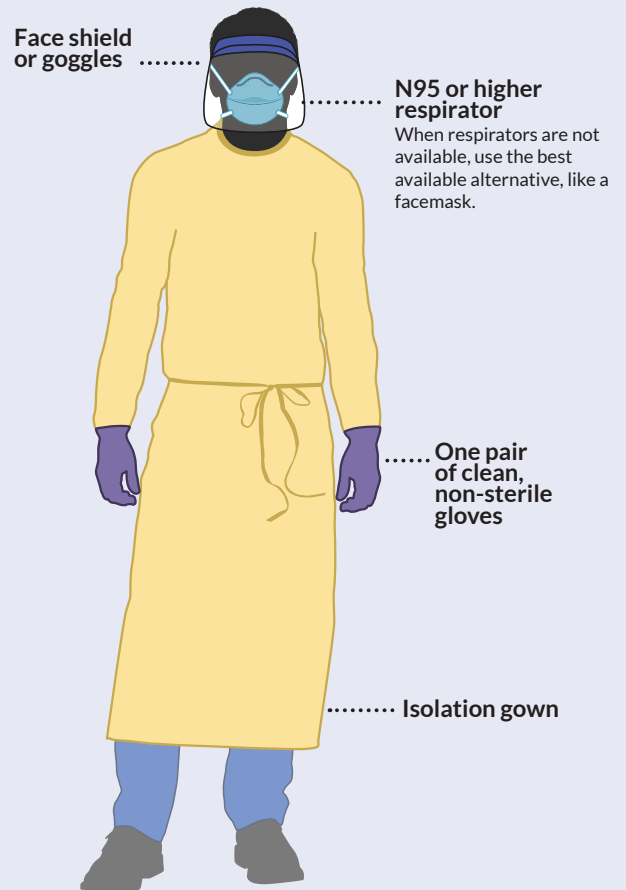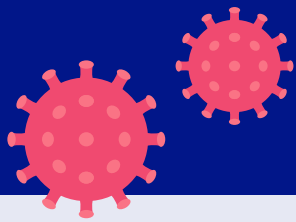
Remember:

- PPE must be donned correctly before entering the patient area (e.g., isolation room, unit if cohorting).
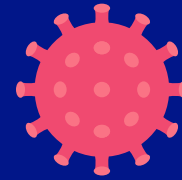- PPE must remain in place and be worn correctly for the duration of work in potentially contaminated areas. PPE should not be adjusted (e.g., retying gown, adjusting respirator/facemask) during patient care.
- PPE must be removed slowly and deliberately in a sequence that prevents self-contamination. A step-by-step process should be developed and used during training and patient care.

Preferred PPE – Use	N95 or Higher Respirator

Face shield or goggles ....

N95 or higher respirator
When respirators are not available, use the best available alternative, like a facemask.

One pair of clean, non-sterile gloves

Isolation gown

GOVERNMENT OF BERMUDA
Ministry of Health

Bermuda Health Council

Face shield or goggles ....

N95 or higher respirator
When respirators are not available, use the best available alternative, like a facemask.

...... **One pair of clean, non-sterile gloves**

.... **Isolation gown**

Donning (putting on the gear):

More than one donning method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of donning.

1. **Identify and gather the proper PPE to don.** Ensure choice of gown size is correct (based on training).

2. **Perform hand hygiene using hand sanitizer.**

3. **Put on isolation gown.** Tie all of the ties on the gown. Assistance may be needed by another HCP.

4. **Put on NIOSH-approved N95 filtering facepiece respirator or higher (use a facemask if a respirator is not available).** If the respirator has a nosepiece, it should be fitted to the nose with both hands, not bent or tented. Do not pinch the nosepiece with one hand. Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin or store in scrubs pocket between patients.*

   » **Respirator:** Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap). Perform a user seal check each time you put on the respirator.

   » **Facemask:** Mask ties should be secured on crown of head (top tie) and base of neck (bottom tie). If mask has loops, hook them appropriately around your ears.

5. **Put on face shield or goggles.** Face shields provide full face coverage. Goggles also provide excellent protection for eyes, but fogging is common.

6. **Perform hand hygiene before putting on gloves.** Gloves should cover the cuff (wrist) of gown.

7. **HCP may now enter patient room.**

Doffing (taking off the gear):

More than one doffing method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of doffing.
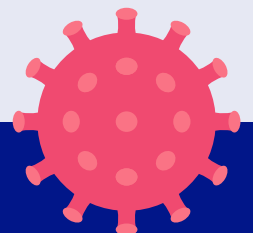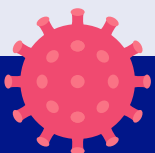
1. **Remove gloves.** Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or bird beak).
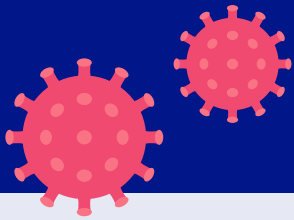
2. **Remove gown.** Untie all ties (or unsnap all buttons). Some gown ties can be broken rather than untied. Do so in gentle manner, avoiding a forceful movement. Reach up to the shoulders and carefully pull gown down and away from the body. Rolling the gown down is an acceptable approach. Dispose in trash receptacle.*
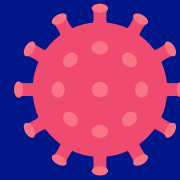
3. **HCP may now exit patient room.**

4. **Perform hand hygiene.**

5. **Remove face shield or goggles.** Carefully remove face

shield or goggles by grabbing the strap and pulling upwards and away from head. Do not touch the front of face shield or goggles.

6. **Remove and discard respirator (or facemask if used instead of respirator).***

   Do not touch the front of the respirator or facemask.

   » **Respirator:** Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator.

   » **Facemask:** Carefully untie (or unhook from the ears) and pull away from face without touching the front.

7. **Perform hand hygiene after removing the respirator/facemask** and before putting it on again if your workplace is practicing reuse.

*Facilities implementing reuse or extended use of PPE will need to adjust their donning and doffing procedures to accommodate those practices.