

## Reopening Your Clinic Amid COVID-19? A Clinic's Lessons Learned



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If only resuming clinical operations during a pandemic were as simple as flipping a switch and welcoming patients back, health care providers across the country would be in a very different situation. The reality is more complicated, as COVID-19 has completely upended past outpatient clinical operations, requiring a “new normal” going forward.

As an outpatient health care leader, as you develop a plan for successfully resuming operations, you'll need to answer many fundamental questions. How will I keep patients safe? How will I protect my staff? How many staff do I need? How can we leverage data to be more nimble and responsive? CMS [here](#) and the AMA [here](#) have published helpful guides on restarting non-emergency clinical care.

The reopening experiences of a high-volume outpatient clinic also provides several valuable lessons learned. In planning for and working through its business resumption, this clinic focused on three principal areas of importance: safely serving patients, ensuring staff safety and resuming operations.

### **Keeping Patients Safe**

Patient safety was the top priority. The clinic quickly established a robust pre-screening process to keep

individuals who may have been exposed to or experiencing symptoms of COVID-19 away from the outpatient setting, and triaging them to a COVID-19 screening center. The pre-screening also incorporated scripting that allowed the clinic's staff to communicate to patients any changes that had been implemented to keep them safe within the clinic.

Initially this pre-screening process was entirely manual and involved the time of countless staff members. The clinic's goal was to transition as much of this screening to digital as possible. A two-phased plan was developed to bring patient pre-screening online. After just six weeks, more than half of the clinic's patient pre-screening was being done electronically. This freed time for clinical staff to do more work with patients in the clinic and spend greater time on the phone with patients who reported positive symptoms during the pre-screening process.

Understanding the importance of rapid communication to patients, the team quickly revamped an existing web site and repurposed it to provide critical patient updates. This included information on visitor restrictions, changed hours of operation and facility changes to maintain social distancing, as well as the clinic's enhanced cleaning protocols.

Most critical in terms of patient safety were the changes the clinic made to scheduling, to ensure that patients did not overlap and that there would be ample time between appointments for cleaning of equipment and shared spaces. The clinic's prior scheduling templates were modified and reduced by 30 percent, subsequently extending the clinic's hours to accommodate a comparable volume of pre-COVID-19 volume.

### **Ensuring Workforce Safety**

Ramping up clinical capacity also meant thinking differently about doing everything possible to keep staff safe while also providing care. The same safety measures for patients were also applied to staff, such as requirements for mask-wearing and social distancing. For clinic staff, physical distancing proved the most challenging, as staff had previously worked in close proximity to one another. To counteract this, the clinic began staggering staff schedules and placed limits, based on office square footage, on the number of staff members in any one clinical area.

The clinic also established an all-staff screening program for exposure to COVID-19 and symptoms of COVID-19, similar to the one used for patients. The clinic is currently investigating the feasibility of both wide-spread and intermittent testing for all of its frontline workers.

### **Reviving Operations**

While patient and staff safety were the clinic's priorities, there was still a need to provide clinical care and resume revenue-generating activities. After severely minimizing its clinical activity to only the most urgent of patient cases, the department faced a significant backlog of outpatient appointments which had been cancelled. The

combination of rescheduled appointments and new volume could not fit within the newly reduced capacity. The clinic began using patient visit data to determine appropriate staffing levels and created dashboards to project volumes and hours of operation required to match demand and revenue requirements.

With daily operational changes in the clinic a new norm, a cycle of daily huddles enabled staff members to assess what was working well and what needed to be changed. These daily huddles allowed staff members to respond more swiftly to quickly changing operational dynamics.

### **Into the Future**

The clinic's recovery continues, as its leaders foresee a lengthy uncertain future ahead. However, based on the clinic's new emphasis on safety and communication, with data-driven metrics and dashboards guiding the way, the department has been able to successfully return to 80 percent of its prior daily patient volume.