SAN MATEO COUNTY HEALTH SYSTEM COMMUNITY HEALTH - PUBLIC HEALTH PROGRAMS

POLICY NUMBER:	2009-124
SUBJECT:	Public Health Clinic Operations During Disaster Incidents & Pandemics
AUTHORITY:	Director – Public Health Programs
SUPERSEDES:	New Policy

PURPOSE:

To outline clinic operations of the Edison, STD, and Mobile Clinics in the event of a healthcare surge and disaster incident. These policies and procedures provide guidelines on disaster operations for all of the Public Health Clinics.

BACKGROUND:

Increased urgent care needs of the Public Health Clinics clients and healthcare surge within SMMC may overwhelm our Public Health clinic system. There may be increased urgent care needs for our clients during outbreaks of communicable diseases, such as pandemic influenza. Additionally, the San Mateo Medical Center (SMMC) may be receiving a large number of patients, resulting in staff or supply shortages. The plan at SMMC to close satellite clinics and to divert staff to SMMC will be initiated when it has been determined that SMMC and/or clinics are receiving a large number of patients resulting in staff and/or supply shortages, (most likely when the Code Triage level goes from level 2 to level 3) OR if the satellite clinics become overwhelmed with the number of patients arriving at the clinic or supplies start running low before activation of the SMMC EOC. These shortages may necessitate closure of SMMC satellite clinics will impact HIV positive clients, as these clients are seen at two of the satellite clinics, North County and Willow Clinics.

Disaster operations within SMMC and Public Health may have significant impact on staffing within the clinics. Some medical staff within the Public Health Clinics may be deployed to work in the labor pool to help provide care in the SMMC emergency department, urgent care clinics, and the hospital. Additionally, some healthcare providers within our Public Health clinics may be deployed to respond to the needs of the pandemic or disaster incident (i.e. staffing the Departmental Operations Center, working at Alternate Care Sites, etc). The Mobile Health Clinic coach may be commandeered for Public Health operations during a disaster.

POLICY:

This policy outlines a phased approach of streamlining clinical operations during a healthcare surge and disaster incident. Phase I will consist of increasing the time interval between patient visits, thus keeping the schedule open for urgent care visits. Phase II will consist of cancelling all routine follow up appointments, testing-only

clinics, and elective visits for immunizations, tuberculin skin tests, and routine physicals, while keeping appointment slots for urgent care needs or healthcare provider-level telephone triage only. Phase III will consist of consolidation of all Public Health clinical services to the Edison Clinic and limiting Mobile Clinic visits to urgent care visits at the shelters. Phase IV will consist of closure of the Edison Clinic and diversion of patients to the SMMC urgent care clinic or emergency department.

Triggers for implementing this various operational phases described in this policy will be dependent on the SMMC Code Triage Levels.

Code Triage Levels

Level 1

- <u>External</u> A multiple casualty situation which can be handled by available staff on duty. Staff recall is not necessary.
- <u>Internal</u> A situation which may seriously affect or threaten the hospital's ability to provide medical services. Situation can be handled by available personnel on duty. No recall is necessary.

Level 2

- <u>External</u> A mass casualty situation that cannot be handled by available staff on duty. Additional staff will be recalled to fill specific functions needed to handle the situation.
- <u>Internal</u> Similar to level 1, however, some portion of the hospital may not be operational. There are large numbers of casualties and it may become necessary to relocate some pre-disaster inpatients. Recall of specific staff to handle the situation is necessary.

Level 3

- <u>External</u> A mass casualty situation involving a large number of casualties. A general recall of hospital staff is necessary to handle the incident.
- <u>Internal</u> The hospital has suffered damage and may not be operational. There are a high number of casualties. There may be a need to transfer casualties and pre-disaster inpatients to other facilities. A general recall of the hospital staff is necessary.

PROCEDURE:

Overall Phased Approach of Clinical Operations

- I. Phase I: Trigger for Phase I is when SMMC calls a Code Triage Level 1
 - A. Edison Clinic: Increase time interval between routine patient visits if possible. Increase open slots for urgent care visits.
 - B. STD Clinic: Decrease frequency of testing-only clinics to once every other week
 - C. Mobile Clinic: Prepare to cancel elective visits for immunizations, tuberculin skin tests, and routine physicals.

- II. Phase II: Trigger for Phase II is when SMMC calls a Code Triage Level 2
 - A. Edison Clinic: Cancel routine follow up visits and keep appointment slots open for urgent care needs and healthcare provider-level telephone triage only.
 - B. STD Clinic: Cancel testing-only clinics and maintain treatment clinics.
 - C. Mobile Clinic: Cancel elective visits for immunizations, tuberculin skin tests, and routine physicals. Prepare to mobilize services to visit shelters for urgent care needs.
- III. Phase III: Trigger for Phase III is when SMMC calls a Code Triage Level 3 OR when satellite clinics start implementing closure procedures.
 - A. Edison Clinic: Consolidate HIV positive patients from Willow and North County Clinics, where they will receive urgent care services at Edison Clinic. Direct all triage calls from Willow and North County to Edison Clinic.
 - B. STD Clinic: Clients needing treatment will access care at the Edison Clinic during regular operating hours.
 - C. Mobile Clinic: The Mobile Health Clinic coach will be commandeered during the disaster incident, leaving staff with one truck. Mobile Health Clinic clients and triage calls may be directed to the Edison Clinic. Prepare to mobilize services to visit shelters for urgent care needs. Prepare to provide supplemental staffing to the Edison Clinic for triage and front desk staffing.
- IV. Phase IV: Trigger for Phase IV is when all PH clinic staff are pulled from their regular responsibilities to help staff SMMC clinics or Public Health-operated alternate care sites, thus resulting in too little staff to keep the clinic open.
 - A. Edison Clinic: HIV positive clients from Edison, Willow, and North county patients will be referred to the nearest urgent care or emergency room for any urgent medical issues. Clients will be encouraged to call their pharmacy for medication refills. Providers who are not pulled to other clinical duties in Public Health or at SMMC will be asked to assist with checking eCW telephone and e-prescribing jellybeans and refilling prescriptions.
 - B. STD Clinic: Clients needing treatment will access care at the SMMC Urgent Care clinic or in the Emergency Department.
 - C. Mobile Clinic: Clients needing treatment will access care at the SMMC Urgent Care clinic or in the Emergency Department.

Roles and Responsibilities

- I. Clinic Manager/Medical Directors:
 - Phase I Will notify providers to increase time duration between clinic visits and to increase the number of refills for medications.
 - Phase II Will notify providers and PSAs to cancel all elective follow up clinic visits and to plan for cancellation of STD Testing-Only clinic. Plan for cancellation of Mobile Clinic visits for routine physicals, TST placements and immunizations.

- Phase III Will consist of consolidating clinical services. Clinic Manager will make predetermined notifications from prepared list of contacts i.e. City of San Mateo, Willow and South San Francisco Clinical Services Managers, ACRC, that all HIV positive clients and only symptomatic STD clients will be seen at Edison Clinic. Only general infectious diseases (ID) patients with acute issues will be seen during this phase. Mobile Clinic clients may have refills and urgent care visits performed at the Edison Clinic, Urgent Care Clinic or Emergency Department, if the demand for acute care services exceeds the capacity for the clinic. Alternatively, Mobile Clinic staff may perform urgent care evaluations at the shelters.
- Phase IV Will consist of closing all Public Health Clinics. Clinic Manager will make predetermined notifications from prepared list of contacts i.e. City of San Mateo, Clinical Services Managers, ACRC, that all Public Health clinics are closed. All Edison, STD, or Mobile Clinic clients may have refills performed at the Edison Clinic. If there are any urgent medical issues, clients will be referred to the Urgent Care Clinic or Emergency Department.

II. Providers:

- Phase I Will increase time duration of routine patient follow ups and increase number of refills for medications
- Phase II Will work with PSA's to cancel all elective follow up clinic visits and grant 6 refills for patients.
- Phase III
 - Be prepared to assist seeing HIV-positive patients from Willow and North County Clinics
 - Be prepared to assist seeing symptomatic STD clients and Mobile Clinic patients
 - Go through refills in eCW and grant 3 refills, regardless of patient compliance and regardless of whether or not the refills are for controlled substances.
- Phase IV may be reassigned to work at alternate care sites or San Mateo Medical Center. One provider may be assigned to help with prescription refills for all of the Public Health Clinics.
- **III. Associate Medical Director** will review undistributed faxes to determine if action is needed at that time.

IV. Patient Services Supervisor/Lead PSAs:

- Phase I Schedule routine patient follow ups further apart. Open up appointments for provider telephone triage and urgent care slots.
- Phase II Cancel all elective follow up clinic visits. Work with other staff to implement cancellation of Mobile Clinic visits for routine physicals, TST placements and immunizations and cancellation of STD testing-only clinics. Open up appointments for provider telephone triage and urgent care slots.
- Phase III
 - Mobile Clinic may be asked to record a phone message instructing clients to call the Edison Clinic. Mobile Clinic PSA's may be asked to report to Edison Clinic.

- Edison or Mobile Clinic PSAs will activate the pre-recorded/scripted phone message(s) in English and Spanish, i.e. "The Edison, Mobile, and STD Clinics will only be open to those with urgent medical needs due to the current pandemic flu emergency. At this time, there will be no STD Testing-Only clinics. Please call the Health System Flu Hotline at 650-573-3927 or refer to the Flu Website at <u>www.smhealth.org/swineflu</u> for the most up-to-date flu information". Continue to call your pharmacy for medication refills. To leave a message for your provider, please call the triage line. We will return your call as soon as we are able to".
- New messages should be recorded on the main line, triage lines, x2256, clinic administration staff extensions, refill line, STD results line and Mobile Clinic land lines. The Clinical Services Manager's extension will be used at the staff sick line. The sick line should advise staff what to do if they are ill, and if not ill, to remain at home and wait for a call instructing them to report to the SMMC Labor Pool. (or call the SMMC Labor Pool Hotline) (to be determined later) The main fax line should be forwarded to the eCW fax line.
- Assign 1-2 clerks to cancel all upcoming appointments for the next 3 days
- Phase IV
 - Edison or Mobile Clinic PSAs will activate the pre-recorded/scripted phone message(s) in English and Spanish, i.e. "The Edison, Mobile, and STD Clinics are closed due to the current pandemic flu emergency. If you are experiencing a medical emergency, please dial 911. If you have a medical problem that is not urgen, please go to the closest urgent care clinic or emergency department. Please call the Health System Flu Hotline at 650-573-3927 or refer to the Flu Website at www.smhealth.org/swineflu for the most up-to-date flu information". Continue to call your pharmacy for medication refills. To leave a message for your provider, please call (*triage line?*). We will return your call as soon as we are able to".
 - New messages should be recorded on the main line, triage lines, x2256, clinic administration staff extensions, refill line, STD results line and Mobile Clinic land lines. The Clinical Services Manager's extension will be used at the staff sick line. The sick line should advise staff what to do if they are ill, and if not ill, to *remain at home and wait for a call instructing them to report to the SMMC Labor Pool. (or call the SMMC Labor Pool Hotline) (to be determined later*) The main fax line should be forwarded to the eCW fax line.
 - Assign 1-2 clerks to cancel all upcoming appointments for the next 3 days

V. Charge Nurse/Acting Charge Nurse:

 Phase I – Remind providers to grant more refills for each patient prescription. Work with other nurses to implement provider triage/telephone treatment plan. Work with PSA's to record separate flu triage and other urgent care issue triage lines.

- Phase II Edison Charge nurse to work with PSA's to schedule provider telephone triage and urgent care slots and assign two nurses to work triage – one for flu lines and the other for non-flu triage. Mobile Clinic charge nurse will implement procedures for cancellation of Mobile Clinic visits for routine physicals, TST placements and immunizations, as well as preparing staff for deployment to shelters once Phase III is implemented.
- Phase III Mobile Clinic Charge Nurse and Edison Clinic Charge Nurse will work together to organize triage efforts for all Public Health Clinics. Mobile Clinic Nurses may participate in the nursing rotation within the Edison Clinic, or may be deployed to do case management visits at the shelters.
- Phase IV All Public Health Clinic triage calls will be handled in one centralized location. New messages will be recorded, encouraging clients to go to the nearest urgent care clinic or emergency department, if they have medical issues. Prescriptions will be handled through eCW, and will be forwarded to the provider designated to approving refills through eCW.

VI. Social Workers/Benefits Counselor:

- Phase I Will notify patients that the clinics may close to routine follow ups and that clients should ask for more medication refills.
- Phase II Will notify patients that clinics have closed to routine follow ups. Contact patients seen at outlying satellite clinics and notify them that they will need to access urgent medical services at the Edison Clinic and to call Edison Clinic for any medication refill needs.
- Phase III Will contact patients seen at Willow and North County Clinics to report to Edison Clinic for urgent medical needs. Will work with Community Outreach Workers to deliver food, medications, or any other essential supplies to HIV positive clients or homeless clients.
- Phase IV Will contact patients with special needs to assess if they have urgent needs. Will work with Community Outreach Workers to deliver food, medications, or any other essential supplies to HIV positive clients or homeless clients.

VII. Charge Nurse/Clinic Manager:

- Phase III/IV-will have an updated list of supplies and keys to access them, if needed by Public Health or SMMC. The list will include quantity and location of: N95 masks, procedure masks, face shields, eye protection, linen, gowns, gloves, tissue, disinfectant wipes, hand cleaner, and flu vaccine.
- Phase III/IV will document name of item(s) distributed, quantity of item(s) distributed, and to whom, in the columns provided on the list.

Approved: December 22, 2009