# A Checklist for Expanding Outpatient Practices During COVID-19: Considerations and Resources

1. **Introduction**

2. **Quick checklist summary**

3. **Before restarting or expanding services: General considerations**
   a. State rules and City guidance
   b. Other guidance for opening and expanding services
   c. Staffing needs
   d. PPE supplies
   e. Vaccines and medications
   f. Other supplies
   g. Prioritizing in-person visits versus telehealth services
   h. Administrative policies
   i. COVID-19 testing
   j. COVID-19 clinical guidance
   k. COVID-19 infection control guidance

4. **Before restarting or expanding services: Operations management**
   a. Review scheduling procedures to maximize social distancing
   b. Requirements for entering the facility
   c. Screening patients and visitors
   d. Staff screening and monitoring
   e. Cleaning and disinfection
   f. Other infection control measures
   g. Staff communication
   h. Patient communication
   i. Telehealth set-up

5. **Optimizing EHR processes**
   a. EHR modifications
   b. Connect with a regional health information exchange

6. **Access to care**
   a. Technology
   b. Medical equipment

7. **COVID-19: Special considerations to support patients and staff**
   a. Support for staff
   b. COVID-19 patient management and support
   c. Psychosocial considerations for patients including socioeconomic challenges

8. **Thinking ahead**

9. **Financial concerns**
10. Resources
1. Introduction

The COVID-19 pandemic has caused major disruptions across the health care system. As the level of community transmission of SARS Co-V-2 declines in New York City (NYC), the benefits of seeking preventive care and care for other conditions will outweigh the risk for exposure to SARS CoV-2.

This checklist was created to help outpatient providers and staff think about what is needed as medical practices reopen or expand in-patient services and adopt new standards of practice. The checklist is geared toward primary care providers, but specialty practices and behavioral health settings may also find it useful.

The checklist is designed to help you provide the best care you can, in the safest way possible, by:

- Keeping up with the latest information and guidance on COVID-19
- Supporting the health and well-being of your staff while planning for potential shortages
- Having adequate supplies of equipment and other items needed to ensure safe and appropriate care
- Reducing transmission risk at your facility by optimizing infection control, triage and physical distancing practices
- Balancing the use of telehealth and in-person visits
- Maintaining or resuming preventive care, sick patient visits and care for chronic conditions
- Leveraging health technology to improve care
- Keeping patients and staff updated as information changes

As you plan your services, keep issues of equity in mind. Some people will not have a smartphone or a computer. Some people can afford a private car service to get to an appointment, while others would have to take public transportation. Take these things into account as you consider the risk-benefit balance for different types of patient visits.

The outbreak of COVID-19 is evolving rapidly. Providers should regularly check for the latest information on the NYC Department of Health and Mental Hygiene, New York State Department of Health (NYSDOH), and the Centers for Disease Control and Prevention’s (CDC) COVID-19 websites.

For more information on pandemic phases and associated planning considerations, please see the Vital Strategies COVID-19 Playbook.
2. Quick checklist summary

State requirements. Comply with State requirements for reopening.

Other guidance. Check for NYC and CDC or other federal-level guidance. Be familiar with guidelines for your specialty on reopening or expanding services.

Staffing needs. Be sure you have enough staff for consistent patient care. Have a plan in case staff members are out sick or need to isolate due to COVID-19 exposure.

Personal protective equipment (PPE) and other infection and transmission control supplies. Be sure you have adequate PPE, hand sanitizer and cleaning supplies to sustain being open.

Supply of vaccines and medications. Make sure expiration dates are current. Assess amounts needed, including taking into account the potential need for catch-up immunizations.

Supplies and processes for COVID-19 testing. Check local, State and federal guidance for updates on testing. Be sure you have adequate testing supplies. Have a plan to report results to patients quickly, along with necessary post-test guidance regarding the meaning of test results and the potential need to isolate.

Administrative policies. Update administrative policies to reflect any changes (such as new sick leave policies, changes in work hours and changes in services).


Infection control policies. Update infection control protocols and policies, such as cleaning and disinfection protocols and protocols for staff exposures to COVID-19. Have clear policies for facility entrance, screening, face coverings and PPE.

Physical distancing. Install engineering controls as needed, such as having plexiglass shields at the front desk. Arrange the waiting room and place signage and floor markers to encourage distancing. Know how to minimize use of the waiting room and other gathering places.

Prioritizing visits. Decide how you will prioritize in-person versus telehealth visits, considering the risks of delaying certain in-person services. Reach out to high-risk patients who are behind on care.

Screening patients. Screen all patients for COVID-19 symptoms over the phone and at the entrance of your facility. Have a plan for what to do if a patient screens positive.

Telehealth set-up. Make sure you have necessary equipment to offer telehealth services. Train staff on telehealth processes including as they relate to Health Insurance Portability and Accountability Act (HIPAA) compliance, documentation and coding.

Staff communication. Educate staff on new clinical guidance, infection control and administrative policies.

Patient communication. Determine method of outreach and inform patients of practice changes (for example, screening for COVID-19, safety precautions, available telehealth services and office hours).
Electronic health record (EHR) utilization. Consider modifying EHR templates for any new protocols. Connect with a Regional Health Information Organization (RHIO) to access patient information from other health care sites.

Planning ahead. Update emergency plans for future phases of the pandemic and other possible emergencies. Have a plan for scaling back services in the event of increased community transmission.

3. Before restarting or expanding services: General considerations

Consider the following to address COVID-19 disruption prior to reopening or expanding in-person visits at outpatient settings.

3a. Comply with State requirements and review City guidance

☐ Make sure your plans are consistent with State rules and regulations, including the State’s Plan for Reopening New York and requirements for resuming elective surgeries.

☐ Check the NYC Health Department’s COVID-19: Information for Providers page for guidance related to reopening or expanding services.

☐ Assign a staff person to continue monitoring for new and updated City, State and federal guidance.

3b. Review other guidance on reopening and expanding services

☐ Review federal resources and guidance such as those from CDC, at Information for Health Care Professionals about COVID-19.

☐ Check your professional association or specialty society for safety recommendations specific to the type of care you provide.

3c. Review staffing needs

☐ Evaluate the minimum and ideal staffing needs, including support staff, cleaning and maintenance and security if needed. Consider:
  o How to mitigate staffing shortages.
  o Criteria for returning to work for staff with suspected or confirmed COVID-19.
  o The current definition of COVID-19 exposure in health care settings and recommendations for exclusion from work.
  o Potential for cross-training staff to maintain essential functions.
  o Extra staffing needs related to COVID-19 screening, follow-up, telehealth and patient outreach.
Plan for how to handle extended leave requests due to COVID-19 illness or exposures, and ensure compliance with the State’s COVID-19 sick leave policy. Consider waiving any requirements for staff to provide a note from their health care provider to document illness or return to work.

Consider assigning staff at higher risk for COVID-19 complications to lower-risk duties or assignments, such as telehealth or preventive care visits.

Consider how current school closures and related child care challenges may impact availability of staff.

NOTE: If your site is an Article 28 facility, make sure you adhere to State requirements for your type of facility and services regarding staff exposures, illness and returning to work.

3d. Assess PPE supply

Your need for certain supplies may shift as our City moves through future phases of the COVID-19 pandemic. You may need to adjust your inventory, ordering times or processes. In addition, some supplies may remain limited while the supply chains recover. The NYC Health Department asks that you make purchases to meet your needs, but not stockpile beyond 90 days until the supply chain has fully recovered.

Take inventory of current PPE supplies, including masks, gloves, gowns, eye protection (face shield or goggles) and, if your practice involves aerosolizing procedures, N95 respirators.

Review current recommendations for PPE from the NYC Health Department, CDC and your professional association.

Estimate the amount of PPE you will need each week:
  - Calculate your potential “burn rate” for PPE.
  - Estimate the number of patients you expect to see.
  - Estimate the number of visits for possible COVID-19 that will require gloves and gowns in addition to eye protection and a face mask.
  - Consider the number of staff who will need those supplies.
  - Consider potential changes with a future wave of COVID-19 cases.
  - Include an extra supply of masks or cloth face coverings for patients and visitors who arrive without a face covering.

Check with suppliers to make sure essential PPE is available.
Implement measures to optimize PPE supplies. Consider the NYC Health Department guidance for extended use and reuse strategies as appropriate.

3e. Check supplies of vaccines and medications

- Take inventory of vaccines and any medications you administer or dispense on site.
- Check expiration dates and make sure any essential temperature controls have been maintained, especially if your facility has been closed.
- Consider how many patients may need to catch up on missed vaccinations or need medication refills. Make sure you have a plan for keeping appropriate amounts in stock.
- Be aware that there may be shortages of some medications and medical supplies.
  - Stay up to date on shortages through the Food and Drug Administration (FDA) and consider alternative treatment options if needed.

3f. Assess other supplies

- Take inventory of other supplies including cleaning and hand hygiene products.
  - Check with your suppliers to ensure essential items are available or identify acceptable alternatives.
  - Refer to List N on the Environmental Protection Agency (EPA) website for EPA-registered disinfectants that have qualified for use against SARS-CoV-2.
- Estimate your need for supplies that may be utilized more than normal, such as:
  - Hand sanitizer
  - Tissues
  - Disinfectant wipes
  - General cleaning supplies

3g. Prepare for how you will prioritize in-person visits versus telehealth

- Review your services and how they will be provided, and update any written policies reflecting this. Consider:
  - Whether you will accept walk-in visits
  - Whether you will limit or restrict patient companions or visitors
  - Whether you will provide access to care and clinical advice by telephone outside business hours
o How you will handle no-shows, and if this should be different for in-person versus telehealth appointments
o Whether you will offer home visits (such as dropping off supplies or checking on ill patients)
o Who you can partner with in the community to provide additional support and referrals for mental health, social services and resources to address social determinants of health

☐ Identify services that need to be in-person (such as immunizations, labs or vital signs if patients cannot report from home) and consider if these can be done with brief on-site visits, with longer discussions or counseling done via telehealth.

☐ For more information, ideas and guidance, see the NYC Health Department’s Health Advisory on how to prioritize for in-person visits. Additional information, including recommendations for vaccinations and for pediatric well care can be found in the Resources section.

3h. Update administrative policies

☐ Update written policies to address any administrative changes related to the COVID-19 outbreak, such as:
o Sick leave (including mental health leave) and return to work protocols
o Family leave
o Work from home rules
o Flexible work hours
o Minimum staff needed on-site
o Job duties and cross-coverage

3i. Review guidance and options for COVID-19 testing

☐ The NYC Health Department currently recommends that all New Yorkers be tested for COVID-19 (June 2020). If you are unable to accommodate all patients, create a system for prioritizing patients to test at your offices and for referring patients elsewhere.
o Many NYC testing sites offer free testing to NYC residents.

☐ Review and stay updated on the latest COVID-19 testing guidance (check the NYC Health Department’s webpage) and how to interpret the results.
o Make sure all clinical staff understand the potential for false negatives.
o Make sure all clinical staff are aware that, currently, serological tests do not confirm immunity.
o Make sure all clinical staff understand quarantine and isolation requirements, including that symptomatic patients should self-quarantine while awaiting test results.
- Make sure you or your lab are using FDA-authorized tests.

- Consider using telehealth for an initial assessment of symptoms (when appropriate), followed by an in-person visit for the test at your facility, a lab or a COVID-19 testing site. See the Resources section for more information.

- Consider testing methods that minimize PPE use and staff exposure risk (such as use of barriers during sample collection or use of patient self-collected samples).

- Determine how to quickly communicate test results to patients.
  - If your practice relies on a web portal, consider whether your patients may have challenges accessing their results.
  - Ensure that patients receive correct information about how to interpret the results.
  - Ensure that patients receive appropriate guidance about self-isolation and quarantine, as appropriate.
  - Consider providing written materials to reinforce explanations about test results and self-isolation and quarantine. See the Resources section for links to some handouts.

3j. Review clinical guidance for COVID-19 management

- Review current assessment and treatment guidance for people with possible or confirmed COVID-19. See the Resources section for links that may be helpful.

- Provide training and education for your clinical staff and direct them to reliable sources for information and continuing medical education.

- Consider using algorithms and protocols to ensure appropriate triage, disposition and follow-up of patients with symptoms suggestive of COVID-19 or with laboratory-confirmed COVID-19. See Resources section for examples.

- If you are not already receiving updates from the NYC Health Department, sign up for the NYC Health Alert Network (HAN), City Health Information bulletins and Dear Colleague letters, and the CDC HAN. Check the NYSDOH Information for Healthcare Providers page for State Health Advisories and create a NYS Health Commerce System account to receive additional information.

- See the section 7b below, “Medical management and patient support during the COVID-19 pandemic,” for additional ideas, guidance and resources.
3k. Update infection control policies and training

☐ Update policies to reflect the latest information on infection control and staff and patient safety recommendations from CDC and the NYC Health Department.

☐ Review local and CDC guidance on risk assessment and work restrictions for health care personnel with potential exposure to COVID-19.

☐ Plan for how you would prevent, identify and manage patient and staff exposures to COVID-19 if a staff person or patient is determined to be positive.

☐ Provide staff job-specific refresher training and education on infection prevention and control best practices, including guidance on what PPE should be used, when, and by whom, and proper donning and doffing of PPE.

4. Before restarting or expanding services: operations management

4a. Revise scheduling procedures to maximize physical distancing

☐ Create workflows to minimize use of waiting areas and place patients in exam rooms as quickly as possible.
  o Complete as much registration information as possible online or over the phone prior to the appointment.
  o Consider scheduling longer appointments, allowing more time between appointments, or alternating in-person and telehealth visits to minimize wait times.

☐ Expand clinic hours to enhance ability to physically distance in waiting rooms.

☐ Stagger shifts or have staff members work on alternate days.
  o Minimize gatherings for staff, such as having staggered lunch schedules or limitations on in-person meetings.

☐ Designate specific times for certain types of visits, such as offering early morning hours for your high-risk patients with non-COVID-19 complaints and dedicated hours for sick visits late in the day.

☐ Eliminate penalties for late cancellations or missed appointments for in-person visits, so patients with suspected or confirmed COVID-19 do not feel pressured to show up for their appointment in order to avoid a fee.
4b. Establish requirements for facility entrance and visitor management

☐ Create a plan for who will be permitted to enter the facility, including which types of companions and visitors (such as the parent of a minor or a support worker).

☐ If your facility has multiple entrances, consider limiting which ones are in use so you do not need a screening station at every door.

☐Require all patients and visitors to wear face coverings when entering your facility and to keep them on while inside, except for children two years of age or younger and people who cannot medically tolerate a face covering. See CDC information on face coverings for the public in health care settings and check the NYC Health Department website for local recommendations.

☐ Be ready to provide face masks or cloth face coverings for people who arrive without one.

☐ Establish a clear policy for what to do if someone refuses to wear a face covering.

4c. Screen patients and visitors for COVID-19

☐ Consider calling patients the day of or day before their scheduled in-person appointment to screen for symptoms of COVID-19 before they arrive at the facility. Develop a protocol for what to do if a patient reports having symptoms or having been identified as a contact to a person with COVID-19 and currently under quarantine.
  ○ Review current public health guidance for identifying and managing patient exposures in the community.

☐ If a patient is coming to your facility for evaluation of possible COVID-19, instruct them on any special precautions to take when traveling to and arriving at the clinic (such as wearing a face covering at all times when they leave their house, calling before entering to ensure you are ready to see them right away, avoiding public transportation if possible, using the stairs or not entering a crowded elevator).

☐ Screen all patients, companions and visitors for possible symptoms of COVID-19, ideally prior to entering the facility (such as screening questions and temperature checks). If possible, screen patients outside.

☐ Ensure that screening is conducted in a manner that preserves patient privacy.

☐ Develop clear protocols for what to do if a patient screens positive. Consider:
  ○ Whether you will defer visits and, if so, what types of visits can be deferred.
Whether you will have patients with suspected COVID-19 use a separate entrance, proceed straight to a designated exam room or follow other special distancing procedures.

4d. Develop staff screening and monitoring processes

☐ Have a clear policy on staff self-monitoring and screening for COVID-19 symptoms (such as screening for symptoms and temperature checks at least daily before each shift) and what to do if symptoms occur either before or during the workday.
  o Specify that staff should not be at work if they have any signs or symptoms that could suggest COVID-19.

☐ Have a clear policy for what staff should do in case of a COVID-19 exposure without appropriate PPE at the workplace, or if they are notified by NYC Test and Trace contact tracers or a medical provider that they have been exposed.

☐ Determine how you will stay up to date on recommendations about COVID-19 exposure, screening and testing for health care staff. Check the CDC website, as well as the NYC Health Department provider webpage for information specific to NYC.

4e. Ensure adequate cleaning and disinfection protocols and processes

☐ Review and follow CDC recommendations for cleaning of exam rooms and equipment between patients and for other areas of your facility; make sure to provide supplies appropriate for SARS-CoV-2.

☐ Make sure protocols include clearly assigned persons and roles responsible for each task and the timing and frequency for cleaning including high-touch surfaces, bathrooms, exam rooms and equipment.

☐ Conduct a walk-through of your facility to identify any frequently touched surfaces that should be added to your cleaning and disinfection protocol during COVID-19 times, such as chairs in patient areas, doorknobs, keyboards, and registration pens and clipboards.

☐ Provide disposable wipes and or other supplies appropriate for SARS-CoV-2 disinfection, so staff can wipe down frequently touched surfaces before and after using them.

4f. Ensure other infection control measures are in place

☐ Require staff to wear face masks while in the facility during times of ongoing community transmission, as well as appropriate PPE based on the type of clinical encounter. For more information, refer to the Infection Control in the Outpatient Setting Guide.
Consider physical measures such as plexiglass barriers to protect front desk staff, cleanable curtains or screens to help divide shared spaces and tape markers on floors to indicate 6 feet of distance.

If you can, optimize clinic air-handling systems (with appropriate directionality, filtration, exchange rate, etc.). If appropriate, consider using portable HEPA filters with appropriate ductwork to create a negative pressure room where potentially aerosol-generating procedures, such as nebulizer treatments, may take place; however, minimize or avoid use of aerosol-generating procedures when possible.

If possible, designate COVID-19 spaces or units for suspected and confirmed cases, such as separate entrances, exam rooms, waiting areas and triage tents.

- Be ready to adjust these measures if needed depending on levels of community transmission.

Dedicate workstations and patient rooms for specific staff to reduce potential cross-contamination.

Place hand sanitizer at entrances, at reception, at workstations and anywhere else with surfaces that are frequently touched.

Place visible reminders about respiratory and hand hygiene in the entrance, waiting areas, break areas and in exam rooms.

Place appropriate signage in places that need physical distancing reminders, such as in waiting areas, elevators, entrance foyers, break rooms and anywhere people might gather or lines might form.

- Make sure signage is easy to read. Consider using graphics and multiple languages.
- Alert staff that some patients and visitors may be unable to read signage and that staff will need to assist them to maintain safe distancing.

Space chairs 6 feet apart in waiting areas. If furniture cannot be moved, cordon off some seats with tape and signage to encourage distancing.

Consider removing magazines, toys and other non-essential shared items from the waiting room and exam rooms. Create a protocol to clean any remaining items frequently.

4g. Update staff communication plans and systems

Update emergency contact lists and ensure they are accessible to all staff.
Educate all staff on all new policies and procedures and have a system for providing regular updates about policy changes, clinical updates, new information about infection control and other developments.
  - Consider providing updates via email, phone, video meetings or text, rather than in person.

Designate specific staff responsible for communicating with public health authorities, health care entities and other key external stakeholders.

4h. Plan for patient communication

Create a written policy and staff guidance for how you will advise patients on expectations when they come to your facility, including:
  - The need to wear a face covering
  - Requirements for distancing while in the facility
  - Whether they can bring companions
  - What will happen if requirements are not followed
  - What should be done if a patient reports symptoms or is identified on screening as possibly having COVID-19

Create messaging that is culturally and linguistically appropriate to share with your patients and ensure outreach is consistent with the patient’s preferred language.

Develop letters, texts or emails (whichever is most appropriate for your practice) to let patients know you are open and what services are offered and about safety measures you are taking.
  - Hours of operation
  - Rules for walk-in visits, sick visits, scheduling new appointments
  - Safety precautions (using a face covering, number of visitors, etc.) and what to expect regarding pre-visit screening
  - How to access clinical advice and care after business hours
  - Availability of telehealth services and how to access them, including how to download any required apps onto phones, tablets or computers
  - Any changes in rules about co-payments or other costs
  - Any changes in cancellation fees for in-person or telehealth visits

Update your office voicemail, telephone prompts and website to reflect the requirement for face coverings, visitor accompaniment and any changes in office hours or services.
4i. Check your set-up for telehealth, if you will be offering telehealth services

☐ Check documentation and coding requirements for each type of telehealth service available at your practice. Be sure your system complies with Center for Medicare & Medicaid Services (CMS), New York Medicaid, HIPAA, and insurance requirements as needed.

☐ Transition to a HIPAA-compliant telehealth solution if you have not done so already and frequently check the websites of CMS, Medicaid and your largest commercial payers for any changes in documentation and coding requirements. NYS requires expanded coverage of telehealth services by Medicaid and commercial plans governed by NYS law, during the COVID-19 public health emergency. Similarly, a CMS waiver temporarily allows for use of various platforms for telehealth. When the waiver ends, there will be stricter requirements. See the Resources section for a link to more information.

☐ Be sure you have adequate technical equipment to implement telehealth services, including a working camera and microphone and a quiet place to conduct each visit.

☐ Make sure telehealth visits cannot be overheard in your facility (or in whatever space you are using, including your home).

☐ If you are new to telehealth or need more information:
  o Register to attend NYC REACH’s live webinars to learn the basics of implementing telehealth solutions and understand the documentation and coding requirements for reimbursement, or watch recordings of previous webinars.
  o Review available information on NYC REACH’s website about how to receive technical assistance with telehealth and updates on potential funding opportunities and policy changes.
  o Check your professional association for additional guidance.

☐ Consider creating messaging for patients to educate them on your available services and how to download the platform on smart phones, tablets and computers.

☐ If you do not already utilize home monitoring (such as pulse oximetry, blood glucose monitoring or blood pressure monitoring), develop a process for prescribing needed equipment and training patients how to use it. See the Resources section for patient handouts and information on home monitoring.

☐ Train staff on documentation, coding, patient consent and confidentiality, and protocols for telehealth services. Consider creating a quality assurance and peer review system specifically for telehealth visits.
Consider how you can utilize nursing staff and other clinical or administrative staff to streamline telehealth visits. Assess if staff roles and processes that were effective in-person could also work for your telehealth visits.

Make sure that your usual language translation service will work with your telehealth setup.

5. Optimizing EHR processes

While not essential before reopening or expanding services, you may want to take advantage of your EHR’s capabilities to streamline care of patients during this time. Here are some considerations.

5a. Consider how your EHR can support new approaches to patient care

Consider modifying your EHR to accommodate current needs, such as:
- Flagging patients with suspected or confirmed COVID-19 and setting alerts for follow-up care and treatment
- Creating a care plan template for patients with possible or confirmed COVID-19
- Documenting unsuccessful outreach attempts or refusal of care
- Generating lists of patients who have missed appointments for chronic disease management or preventive care
- Creating a template to differentiate between telehealth and in-person visits

5b. Connect with a regional health information exchange

If you have not already done so, integrate with a qualified entity (QE), such as Healthix or the Bronx RHIO to receive alerts on patients admitted, discharged and transferred within in-patient settings.

Train appropriate staff members on using the QE.

6. Optimizing access to care

Telehealth has been a great help to maintain access to care during the COVID-19 pandemic. However, not all clinical situations are appropriate for telehealth visits and not all patients are able to access such services. The NYC Health Department recommends that you consider the following as you reopen or expand your services.

6a. Technology support

Some patients will need help setting up telehealth on their device. Some will not have a telephone, video capability or internet access.

Here are some things you can do to help your patients in such situations.
Accommodate audio-only visits (also known as telephonic services and virtual check-ins).

Refer patients to services that can help income-eligible New Yorkers obtain an inexpensive phone line or mobile phone. See the Resource section for links.

Delegate and train staff to provide technical assistance to patients.
  o Assign staff to provide extra support and training to patients who are not comfortable with technology.

Plan longer visit times for patients who are not used to using virtual technology.

Plan longer visit times for patients with cognitive or physical impairments.

Ask your patient if they have a family member or caregiver who can help facilitate the telehealth appointment.

6b. Medical equipment

Some of your patients who normally come in regularly for management of hypertension, diabetes and other chronic conditions may have trouble getting to your facility or prefer telehealth visits. Here are some ways you can help keep those patients on track.

Check whether your patient has the necessary equipment to monitor their health at home (such as a blood pressure monitor, glucose monitor, thermometer, pulse oximeter, etc.) Support patients’ access to these supplies through their private insurance plan, Medicaid or Medicare, if eligible.

Provide written instructions on proper use of equipment and provide additional support if needed. See the Resource section for links to printable materials.

Establish clear processes to collect their monitoring results if reporting does not happen automatically. See the Resources section for links to printable tracking cards.

7. COVID-19: Special considerations to support patients and staff

7a. Emotional and social support for staff

The following are suggestions to help support your staff during the current disruption and potential future waves of the COVID-19 pandemic.
Provide trauma and resilience-informed care resources and support to staff to cope with stress, trauma, grief, burnout, and social determinants of health, including for those who are furloughed. See the Resources section for relevant links and information.

- Educate staff on stress responses, resilience and coping tools.
- Review and share tips for health care workers on managing stress, staying connected and creating a supportive work environment. See the Resources section for links to other languages.
- Provide forums for staff to check in with each other and share their experiences.
- Consider sharing information about the NYC Health Department resources on COVID-19 Coping and Emotional Well-Being (several documents available in multiple languages) and NYC’s portal for mental health and substance abuse counseling and treatment, NYC Well.
- Visit the NYC coronavirus webpage for a wide range of services related to the COVID-19 outbreak, including support for food, employment, housing and more.
- See the Resources section for other links that may be helpful to support staff well-being.

Inform staff of the City’s COVID-19 Hotel Program. They may be eligible if they have confirmed or possible COVID-19 or exposure to a COVID-19-positive person. Availability of this program may change; check the website for the latest information.

7b. Medical management and patient support during the COVID-19 pandemic

Patients may have new medical needs, whether COVID-19-related or not. Here are some considerations and resources to help you manage these new or emerging challenges.

- Consider what you can do to address COVID-19 health inequities.

- Provide education to all patients with confirmed or suspected COVID-19 on symptoms that require urgent care.
  - NYC Health Department Patient Fact Sheet on Symptoms (multiple languages available)
  - National Institute of Health (NIH) guidance on risk stratification and who can be managed at home

- Consider the post-discharge management needs of patients with COVID-19 returning from hospitalization, who may also have complex home health needs. If you do not already have staff assigned to help with this, consider having dedicated case manager(s).

- Determine what tools you will recommend to monitor your patients with COVID-19 or suspected COVID-19 at home, such as pulse oximeters and thermometers. Decide
whether you will provide these items, and, if so, how you will manage ordering and inventory.

☐ Consider the physical implications of people staying at home more often, including a possible decrease in physical activity. For example:
  o Consider screening older adults for increased fall risks.
  o Consider increased monitoring for blood glucose in people with type 2 diabetes.
  o Remind patients how to take medications correctly, given disruptions in usual schedules.
  o Discuss ways to maintain physical activity during physical distancing.
  o Consider proactively contacting vulnerable and high-risk patients, especially those who are behind on visits or due for necessary care.

7c. Psychosocial considerations for patients due to COVID-19 impact

☐ Provide information to eligible patients about the City’s COVID-19 Hotel Program, for those who need to isolate from household members but cannot physically distance in their setting. Availability of this program may change; check the website for the latest information.

☐ Employ bias-reducing and trauma and resilience-informed approaches with patients, who may be experiencing direct complications from COVID-19, but also trauma and psychosocial stressors resulting from loss of loved ones, unemployment, domestic violence, etc. See Resources section for additional links.
  o Visit NYC Health Department for resources on COVID-19 Coping and Emotional Well-Being webpage.
  o View this NYC Health Department Dear Colleague Letter, which includes guidance on recognizing and addressing behavioral health concerns during the COVID-19 pandemic.
  o Consider routine mental health screenings for patients at higher risk for severe illness, stress and depression due to COVID-19 (such as older adults, people with underlying health conditions, including behavioral issues or disabilities).

☐ Consider how you can better integrate social, mental health and medical services in your practice, including regular screening and providing referrals and resources for the following (see the Resources section for links and resources):
  o Mental health issues, including depression, anxiety, grief and loss
  o Substance use disorders and other negative coping strategies
  o Domestic and interpersonal violence
  o Isolation (especially among older adults, but affecting all age groups during physical distancing)
  o Social determinants of health including food insecurity, poverty and housing insecurity
Consider using your EHR to help you identify and respond to psychosocial issues and needs, for example:

- Using or building templates and structured fields for screenings for mental health and social services needs
- Incorporating screening information into telehealth workflows
- Implementing clinical decision support system alerts for positive results
- Consider engaging patients in advance directive conversations sooner than you might otherwise, due to the possibility of severe COVID-19 illness. See the Resources section for links to information and forms that may be helpful. Provide staff with palliative care communication resources.

Maintain a list of culturally and linguistically appropriate behavioral health resources and social services to share with your patients. See the Resources section for some tools to find resources in your neighborhood.

8. Thinking ahead

While COVID-19 has been a major focus of the health care system recently, other challenges persist. The following are intended to help you think ahead to future challenges and be ready to adapt. You can find guidance on planning for emergencies in the City Health Information publication Emergency Preparedness for Health Care Providers and Their Patients.

Create a plan for supporting patients during summer heat emergencies.

- Consider providing information to at-risk patients (including people aged 65 or older) on coping with extreme heat.
- Under current circumstances, some patients may be isolating at home with limited cooling options.
- Consider doing check-ins with patients vulnerable to heat stroke.
- At-risk patients may qualify for a free air conditioner through the Home Energy Assistance Program. They can call the Human Resources Administration at 212-331-3126 to determine if they qualify and to request an application.
- For information on preparing for heat emergencies, see the NYC Health Department heat information webpage.

Review and, if needed, update your facility’s plans for how to prepare for:

- Coastal storm season
- Dealing with power outages
- Continued shortages of supplies and medications, if these occur

Think through how your facility can adapt to an increase in respiratory illness during flu season if COVID-19 is still a concern at that time. Emphasize the importance of influenza vaccination to patients and staff.
9. Financial concerns

If your practice is facing financial hardship due to the impact of COVID-19, check for opportunities for financial support related to the pandemic. The availability of support will change over time. See the Resources section for some potentially useful links.

10. Resources

The following resources are organized according to the sections in the main document.

Section 3. Considerations before restarting or expanding services

Check State requirements and City guidance

Plan for Reopening New York
The Governor’s plan to reopen NYS, with specific metrics and industries identified. Information about resuming elective surgeries may be published separately.
forward.ny.gov

NYC Health Department COVID-19: Information for Providers
NYC Health Department portal for health care providers. Check the guidance documents on infection control, isolation and quarantine, testing and other matters.
www1.nyc.gov/site/doh/covid/covid-19-providers

Review other guidance on reopening or expanding services

CDC Activities and Initiatives Supporting the COVID-19 Response and the President’s Plan for Opening America Up Again
Provides a summary of CDC’s initiatives, activities, and tools in support of the Whole-of Government response to COVID-19

Information for Health Care Professionals about COVID-19
The CDC’s main page for clinical and infection control guidance for health care providers.
cdc.gov/coronavirus/2019-nCoV/hcp/index.html
CMS Reopening Facilities to Provide Non-Emergent Non-COVID-19 Health Care: Phase I
Centers for Medicare & Medicaid Services (CMS) Recommendations to expand services in the setting of decreasing community transmission of COVID-19.

NYSDOH Interim Guidance for Dentistry During the COVID-19 Public Health Emergency
NYS Interim Guidance for Dentistry During the COVID-19 Public Health Emergency, including precautions to help protect against the spread of COVID-19 as dentistry facilities reopen or continue to operate for elective and emergency procedures.

Review staffing needs

Strategies to Mitigate Health Care Personnel Staffing Shortages
Contingency and crisis strategies to manage staffing shortages due to COVID-19 exposure or infection.
cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html

Criteria for Return to Work for Health Care Personnel with Suspected or Confirmed COVID-19
(Interim Guidance)
Recommendations on when health care workers can return to work (New York Article 28 facility employees should also check with their employer on when to return).
cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html

Interim U.S. Guidance for Risk Assessment and Work Restrictions for Health Care Personnel with Potential Exposure to COVID-19
Definition of COVID-19 exposure under different circumstances in health care settings.

Assess PPE supplies

NYC Health Department COVID-19: Infection Control in the Outpatient Setting
A quick reference guide for infection control in outpatient settings. Continue to check the Health Department Provider Page for most up-to-date recommendations for PPE.
Personal Protective Equipment (PPE) Burn Rate Calculator
A spreadsheet or app to help you calculate how quickly you use up PPE and how much you need to buy.

Strategies for PPE Reuse and Extended Use
NYC Health Department recommendations to reduce risk when measures are needed to conserve supplies of PPE in resource limited settings.

Strategies to Optimize the Supply of PPE and Equipment
Strategies for normal use, when shortages are expected, and when shortages occur.

Check supplies of vaccines and medications

FDA Drug Shortages database
A searchable database showing drug shortages
fda.gov/drugs/drug-safety-and-availability/drug-shortages

Prepare for how you will prioritize in-person visits versus telehealth

CDC Framework for Health Care Systems Providing Non-COVID-19 Clinical Care During the COVID-19 Pandemic
Guidance for prioritizing types of visits at different levels of community transmission and risk of harm.

CDC Guidance on People Who Need to Take Extra Precautions

Guidance on Providing Pediatric Well-Care During COVID-19
Recommendations from the American Academy of Pediatrics on prioritizing care, including preventive care, in the setting of a COVID-19.
Child, Adolescent and Adult Immunization Schedules
Recommended immunization schedules and catch-up schedules.
cdc.gov/vaccines/schedules/index

Vaccination Recommendations During the COVID-19 Pandemic
Guidance for maintaining childhood immunizations and delivering adult immunizations during the COVID-19 pandemic.
cdc.gov/vaccines/schedules/hcp/schedule-changes

Citywide Immunization Registry
Information page with a link to the Citywide Immunization Registry.
www1.nyc.gov/site/doh/providers/reporting-and-services/citywide-immunization-registry-cir.page

2020 HAN #17: Advise Patients When to Seek Essential Care and Plan to Expand In-Person Patient Services
NYC Health Department guidance on types of care to prioritize for in-person visits.

NYC Reach Risk Stratification Tool
nycreach.org/covid-19/#1590730357082-71aaeac9-3e4d

Review guidance and options for COVID-19 testing

Evaluating and Testing Persons for COVID-19
CDC guidance on testing priorities and recommendations.
cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria

NYC Health Department COVID-19: Information for Providers
NYC Health Department portal for healthcare providers. Check the guidance documents for the latest update on testing.
www1.nyc.gov/site/doh/covid/covid-19-providers

NYC COVID-19 Testing Page
Information for the public on testing recommendations and locations.
FDA Emergency Use Authorization
Links to lists of all FDA emergency use authorizations for COVID-19 tests.

NYC Test and Trace Corps website
Contains patient-friendly information about testing, with a link to a patient handout.
ychealthandhospitals.org/test-and-trace/testing

COVID-19 Testing: Frequently Asked Questions
An FAQ from the NYC Health Department, intended for the general public.

Special Coding Advice During COVID-19 Public Health Emergency
Guidance from the American Medical Association (AMA) on billing for COVID-19 testing in different scenarios.

Review clinical guidance for COVID-19 management

NIH Coronavirus Disease 2019 (COVID-19) Treatment Guidelines
Guidance from an expert panel. Includes information on both outpatient and in-patient management, including assessing signs and symptoms as mild, moderate, or severe, and guidance for patient disposition.
covid19treatmentguidelines.nih.gov

Infectious Disease Society of America (IDSA) COVID-19 Resource Center
Guidelines and other resources from IDSA.
idssociety.org/public-health/COVID-19-Resource-Center

Clinical Care Guidance for Health Care Professionals About Coronavirus (COVID-19)
Main portal for CDC’s clinical information and guidance.
cdc.gov/coronavirus/2019-ncov/hcp/clinical-care

Information for Pediatric Health Care Providers
Guidance from the CDC specifically for pediatric practices, including clinical guidance on COVID-19 and information on managing preventive care during the outbreak.
cdc.gov/coronavirus/2019-ncov/hcp/pediatric-hcp
Phone Advice Line Tool for Possible COVID-19 Patients
A phone script and clinical decision algorithm to help guide patient triage and disposition.
cdc.gov/coronavirus/2019-ncov/hcp/phone-guide/index

NYC Health Department COVID-19: Information for Providers
NYC Health Department portal for health care providers, with a link to the latest update on testing.
www1.nyc.gov/site/doh/covid/covid-19-providers

NYC HAN
Sign-up page to receive NYC HAN bulletins.
www1.nyc.gov/site/doh/providers/resources/health-alert-network

City Health Information
Sign-up page to receive City Health Information publications from the NYC Health Department.
a816-healthpsni.nyc.gov/OnlineRegistration/dohmh

New York State Information for Health Care Providers
COVID-19 advisories, webinars and other current information for the NYSDOH.
coronavirus.health.ny.gov/information-healthcare-providers

New York State Health Commerce System
Secure website for interactions with the NYSDOH.
commerce.health.state.ny.us

CDC HAN
Registration page to receive CDC HAN bulletins.
emergency.cdc.gov/han/updates.asp

Update infection control policies and training

Interim Infection Prevention and Control Recommendations for Patients With Suspected or Confirmed COVID-19 in Health Care Settings
Addresses multiple infection control issues including screening, check-in and triage, patient placement, environmental and engineering controls and other transmission precautions.
cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations
CDC Infection Control Guidance for Health Care Professionals about COVID-19
Main page for CDC infection control guidance in health care settings.
cdc.gov/coronavirus/2019-ncov/hcp/infection-control

Using PPE
CDC guidance on donning and doffing PPE, with links to additional guidance on PPE for COVID-19 protection.
cdc.gov/coronavirus/2019-ncov/hcp/using-ppe

Section 4. Operations management
Establish requirements for facility entrance and visitor management

Interim Infection Prevention and Control Recommendations for Patients With Suspected or Confirmed COVID-19 in Health Care Settings
Infection control recommendations from CDC, including information about managing facility access and face coverings for patients and visitors.
cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations

NYC Health Department – COVID-19: Information for Providers
Portal for health care providers, including information on infection control and use of face coverings and PPE.
www1.nyc.gov/site/doh/covid/covid-19-providers

City of New York – How to Access Free Face Coverings
www1.nyc.gov/nycbusiness/article/free-face-coverings

Screen patients and visitors for COVID-19

2020 Health Advisory #15: Updated NYC Health Department Recommendations for Identifying and Testing Patients With Suspected COVID-19
Testing guidance current as of May 15, 2020. Continue to check the NYC Health Department Provider Page for updates.
Public Health Recommendations for Community-Related Exposure
Information about risks related to exposure to COVID-19 in community settings.

Develop staff screening and monitoring processes

Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Health Care Settings
Covers screening staff in the section Monitor and Manage Health Care Personnel.
cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#monitor_manage

The CDC’s definitions of exposures and what to do in different cases. Focus is on guidance and decision-making for exposures in health care workers.

NYC Health Department - Sample COVID-19 Symptom Screening Tool for Employees

Ensure adequate cleaning and disinfection protocols and processes

Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Health Care Settings
Infection control recommendations from CDC. See Section 10, Implement Environmental Infection Control, for information on cleaning and disinfection.
cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations

Disinfectants for Use Against SARS-CoV-2
List of products that meet EPA’s criteria for use against SARS-CoV-2. Includes information on how to use them and what to use if you cannot find any of the products on the list.
epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Ensure other infection control measures are in place
Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Health Care Settings.

Infection control recommendations from CDC, including environmental, engineering and administrative controls.

cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations

Health Care Infection Prevention and Control FAQs for COVID-19

Contains information on how long an exam room needs to remain vacant after being occupied by a patient with confirmed or suspected COVID-19.

cdc.gov/coronavirus/2019-ncov/hcp/infection-control-faq

Engineering Controls to Reduce Airborne, Droplet and Contact Exposures During Epidemic or Pandemic Response

Use of HEPA filters to create airborne isolation areas.

cdc.gov/niosh/topics/healthcare/engcontrolsolutions/expedient-patient-isolation

Airborne Infectious Disease Management – Methods for Temporary Negative Pressure Isolation

Illustrated handbook on how to use portable HEPA filters, including how to set up ductwork.

health.state.mn.us/communities/ep/surge/infectious/airbornenegative.pdf

COVID-19 Posters and Flyers from NYC webpage

Printable posters and flyers.

nyc.gov/site/doh/covid/covid-19-posters-and-flyers

NYC Health Department Outpatient Infection Control Quick Guide

A brief outline of PPE and other infection control recommendations from the NYC Health Department.


Check your set-up for telehealth

Medicare Telemedicine Health Care Provider Fact Sheet:

Information about Medicare coverage and payment of virtual services (dated March 17, 2020; check for updated information)

cms.gov/newsroom fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet
NYS Medicaid Update: Comprehensive Guidance Regarding Use of Telehealth including Telephonic Services During the COVID-19 State of Emergency

Information from New York Medicaid on telehealth definitions and billing rules.
health.ny.gov/health_care/medicaid/program/update/2020/no05_2020-03_covid-19_telehealth.htm

NYS Information for Insurers and Providers on Coverage for Telehealth Services

Information for NYS Commercial insurers and providers about health insurance coverage and requirements for telehealth visits.
dfs.ny.gov/industry_guidance/coronavirus/telehealth_ins_prov_info

NYC REACH COVID-19 Support for Providers

Links to a wide range of information and resources to help clinical sites navigate the COVID-19 outbreak, including webinars on using telehealth. NYC Reach, an NYC Health Department program, assists NYC-based independently owned private practices, community health centers, and hospital ambulatory-based sites with adopting and implementing health information systems, quality improvement and practice transformation initiatives.
nycreach.org/covid-19/

NYC Health Department’s Hypertension Action Kit

Contains guidance for health care providers on home blood pressure monitoring and printable resources, including a patient education handout on measuring blood pressure at home and a card for tracking blood pressure measurements.
www1.nyc.gov/site/doh/providers/resources/public-health-action-kits-hypertension

How to take your blood pressure patient handout

Blood pressure tracking card

Validated Home Blood Pressure Monitors

List of blood pressure monitors validated for clinical accuracy based on criteria from the AMA.
validatebp.org

Guidance including information on home blood pressure monitoring.

ahajournals.org/doi/10.1161/HYP.0000000000000065

Plan for patient communication

Academy of Communication in Healthcare COVID-19 Communication: Connecting Across Differences

achonline.org/Connecting-Across-Differences

Center to Advance Palliative Care COVID-19 Communication Scripts and Conversation Videos

capc.org/covid-19/communication/

Vital Talks COVID-19 Communications Resources

vitaltalk.org/covid-resources/

American Hospital Association COVID-19 Communications Resources

aha.org/2020-04-03-covid-19-communications-resources

Section 5. Optimizing EHR processes

Connect with a Regional Health Information Exchange

Healthix

RHIO serving NYC and Long Island.

healthix.org

Bronx RHIO

RHIO serving healthcare organizations in the Bronx.

bronxrhio.org

Section 6. Optimizing access to care

Technology support
Free or discounted phone services

**SafeLink Wireless Program**
A government-supported program that provides cell phones to income-eligible New Yorkers.
portal.311.nyc.gov/article/?kanumber=KA-02961

**Lifeline**
A federal program for discounted phone service.
211nys.org/lifeline-assistance-program

Medical equipment

**NYC Health Department’s Hypertension Action Kit**
Contains guidance for health care providers on home blood pressure monitoring and printable resources including a patient education handout on measuring blood pressure at home and a card for tracking blood pressure measurements.
www1.nyc.gov/site/doh/providers/resources/public-health-action-kits-hypertension.page

How to take your blood pressure patient handout

Blood pressure tracking card

**NYC Health Department’s Diabetes Checkbook**
A printable log for patients to record their blood glucose levels and medications.

Section 7. COVID-19: Special considerations to support patients and staff

Emotional and social support for staff

**City of New York COVID-19 Hotel Program for Health Care Workers and Volunteers**
Free hotel rooms for frontline workers in the health care industry who are currently working to address the COVID-19 crisis, who are at risk of being exposed to or contracting COVID-19, and who are temporarily unable to live at home.
www1.nyc.gov/site/helpnownyc/get-help/covid-19-hotel-program
NYC Coronavirus Webpage
Resources for individual New Yorkers, as well as for businesses and non-profits. Links to support for food, employment, housing and more.
www1.nyc.gov/site/coronavirus

NYC Health Department COVID-19: Coping and Emotional Well-Being
Information and resources for providers and patients on how to manage stress and isolation during the pandemic, including “COVID-19: Taking Care of Your Emotional Well-Being: Tips for Health Care Workers During COVID-19.” Also includes resources for dealing with loss, domestic violence and suicide thoughts. Several documents have translations into multiple languages available.
www1.nyc.gov/site/doh/covid/covid-19-mental-health

NYC Well
Free, confidential mental health support. Callers can speak to a counselor via phone, text or chat and get access to mental health and substance use services, in more than 200 languages, 24/7 and 365 days a year.
nycwell.cityofnewyork.us/en

National Academy of Medicine
Resources to support the health and well-being of clinicians during the COVID-19 outbreak. Links to information and resources from the World Health Organization, U.S. agencies, and professional organizations and associations.
nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-resources-during-covid-19/

Center for the Study on Traumatic Stress
Fact sheets and other resources to support the health and well-being of communities impacted by COVID-19. Includes resources for health care workers, caring for patients and families and more.

The Schwartz Center for Compassionate Health Care
Resources to support health care professionals coping with COVID-19.
theschwartzcenter.org/covid-19?utm_source=website&utm_medium=banner&utm_campaign=covid19

Center of Excellence for Integrated Health Solutions
Center funded by the Substance Abuse and Mental Health Services Administration. Offers trainings and educational resources, including information relevant to trauma.
thenationalcouncil.org/integrated-health-coe

Patient management and support during the COVID-19 pandemic

COVID-19: Symptoms and What to Do When Sick
Information for patients from the NYC Heath Department, including a printable handout.
www1.nyc.gov/site/doh/covid/covid-19-symptoms-chronic-health-risks

NIH COVID-19 Treatment Guidelines
Guidance from an expert panel. Includes information on both outpatient and in-patient management, including assessing signs and symptoms as mild, moderate, or severe and guidance for patient disposition.
covid19treatmentguidelines.nih.gov

CDC STEADI (Stopping Elderly Accidents, Deaths and Injuries)
Assessment tools, patient handouts and training.
cdc.gov/steadi/index.html

People Who Are at Higher Risk for Severe Illness
Information from the CDC to help you identify people at higher risk for severe COVID-19 illness.
cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk

Psychosocial considerations for patients due to COVID-19 impact

City of New York COVID-19 Hotel Program for Community Health Care Providers
Hotel rooms for patients recovering from COVID-19 and unable to isolate at home. Visit webpage for details, including how to help patients access this program.
www1.nyc.gov/site/helpnownyc/get-help/covid-19-hotel-program

NYC Health Department Dear Colleague Letter (April 21)
Features a section on “Recognizing and Addressing Behavioral Health Concerns,” with information on inquiring about behavioral health needs, normalizing reactions, promoting resiliency, screening for anxiety and depression, and making referrals.
National Alliance on Mental Illness COVID-19 Resource and Information Guide

SAMHSA’s quick start guide to behavioral health integration for safety-net primary care providers
thenationalcouncil.org/wp-content/uploads/2020/01/Website-Resources.pdf?daf=375ateTbd56

The National Council’s Core competencies for integrated behavioral health and primary care
thenationalcouncil.org/wp-content/uploads/2020/01/Integration_Competencies_Final.pdf?daf=375ateTbd56

Structural Vulnerability Assessment Tool
Bourgois P, Holmes SM, Quesada J. Structural Vulnerability: Operationalizing the Concept to Address Health Disparities in Clinical Care. Acad Med. 2017;92(3):299-307. Includes definitions of key terms and sample screening questions and assessment probes to use with patients; question domains include financial security, residence, risk environments, food access, social network and discrimination.
cbi.nlm.nih.gov/pmc/articles/PMC5233668

Resources for New Yorkers
Extensive information about NYC services in response to COVID-19, including information on assistance with food, housing, employment and more. Also includes a link to funeral information and assistance.
www1.nyc.gov/site/coronavirus/resources/resources-for-new-yorkers
access.nyc.gov

NYC Well
Free, confidential mental health support. Callers can speak to a counselor via phone, text or chat and get access to mental health and substance use services, in more than 200 languages, 24/7, 365 days a year.
nycwell.cityofnewyork.us/en
NYC Health Department’s Depression Action Kit
The Depression Action Kit includes links to a PHQ-9 depression screener, patient handouts and educational materials.

nyc.gov/site/doh/providers/resources/public-health-action-kits-depression

NYC Health Department Domestic Violence webpage
Includes the City domestic violence hotline and links to outside partners.

nyc.gov/site/dhs/prevention/domestic-violence

COVID-19: Stress and Coping
Information from the CDC for individuals and families.


Advance Care Planning
Information from the NYSDOH on Advance Planning, including information about options and links to useful forms.

health.ny.gov/diseases/conditions/dementia/adv_care_planning

Center to Advance Palliative Care COVID-19 Response Resources
Offers scripts and guidance for difficult conversations, including not only end-of-life care but also goals of care, hospital admissions and other challenging issues related to COVID-19.

capc.org/toolkits/covid-19-response-resources

Health Information Tool for Empowerment (HITE) Online Resource Directory
HITE, operated by the Greater New York Hospital Association, is a searchable directory of free and low-cost health and social services for New Yorkers.

hitesite.org

NYC Assistance for Individuals (employment, food, health, financial, housing, emotional and other services)

www1.nyc.gov/site/helpnownyc/get-help/individuals.page

COVID-19 Resources by Neighborhood
Neighborhood “snapshots” with groceries and pharmacies that deliver and social services organizations in neighborhoods hard-hit by COVID-19, created for the City’s COVID-19 response.

www1.nyc.gov/site/doh/covid/covid-19-communities.page
Center of Excellence for Integrated Health Solutions

The Center is funded by the Substance Abuse and Mental Health Services Administration and offers trainings and educational resources, including information relevant to trauma.
thenationalcouncil.org/integrated-health-coe

Section 8. Thinking ahead

Emergency Preparedness for Health Care Providers and Their Patients

City Health Information publication with recommendations and resources for creating your own preparedness plan, from the NYC Health Department.

NYC Health Department Emergency Preparedness webpage for community health centers and private providers

Resources and templates for creating an emergency preparedness plan.
www1.nyc.gov/site/doh/providers/emergency-prep/community-health-centers-and-private-providers

Section 9. Financial concerns

NYC Reach Financial Relief page

Information compiled by NYC Reach on funding opportunities. As of late May 2020, the webpage is being updated as new information becomes available.
nycreach.org/2020/04/17/covid-19-financial-support

NYC Reach Webinar: How Providers can benefit from free legal services from the Small Business Legal Relief Alliance (SBLRA)
nyc-reach.webex.com/ec3300/eventcenter/enroll/register.do?siteurl=nyc-reach&formId=107974747&confId=107974747&formType=1&loadFlag=1&eventType=1&accessType=viewRecording&internalPBBRecordTicket=4832534b00000004a621c2859db69347bab3d4067ceb67d6a12446624037d7ad79237c8a7fa4380b

NYC Assistance for Organizations

www1.nyc.gov/site/helpnownyc/get-help/organizations.page

Community Health Care Association of NYS:

Resources on Finance, Funding and Operations.
Federal Funding Resources Related to COVID-19:
A spreadsheet which consolidates a range of information on seven sources of Federal funds related to COVID-19.
chcanys.info/post/federal-funding-sources-related-to-covid-19