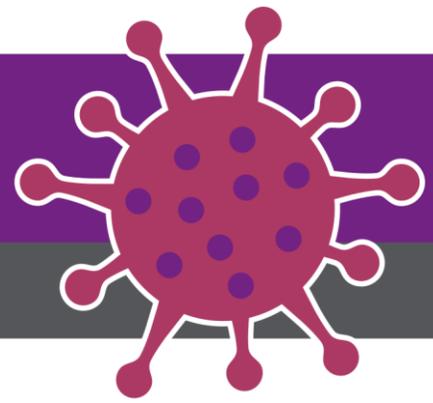


CORONAVIRUS DISEASE 2019 (COVID-19)

PUI Follow Up



Audience: RHM Executive and Clinical Leadership, Community Health and Well-Being, Population Health

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COVID-19 Follow-Up Required as Part of Trinity Health Standard of Care

Trinity Health remains steadfast in our commitment to safety as a Core Value and we are working diligently to protect our colleagues and communities from exposure to COVID-19. We are following Centers for Disease Control and Prevention (CDC) and other public health authority guidance to ensure that our clinical and community care is consistent with the latest recommendations and research.

To support these efforts, all ministries must follow-up with all patients and colleagues who are sent home with either confirmed or suspected COVID-19.

Rationale

The CDC recommends that colleagues and patients who are confirmed or suspected positive for COVID-19, adhere to home isolation until the risk of secondary transmission is thought to be low. This includes patients evaluated in an outpatient setting who do not require hospitalization (i.e., patients who are medically stable and can receive care at home) or patients who are discharged home following a hospitalization with confirmed COVID-19 infection.

It is imperative that all patients and colleagues sent home are followed-up with to ensure their symptoms are not worsening and they have access to critical resources like food and medicine.

Trinity Health guidance for Follow-Up

In consultation with state or local health department staff, healthcare professionals should assess whether the residential setting is appropriate for home care. Considerations for care at home include whether:

- Resources for access to food and other necessities are available
- The patient and other household members have access to recommended personal protective equipment (at a minimum, gloves and facemask) and can adhere to precautions recommended as part of home care or isolation (e.g., respiratory hygiene and cough etiquette, hand hygiene),
- There is a separate bedroom where the patient can recover without sharing immediate space with others.

All follow-ups should:

1. Assess for worsening symptoms and/or unmet needs (e.g. lack of food or medication) that could arise when there are extended periods of isolation.
 - a. Low-risk patients should be contacted at least once
 - b. High-risk patient should be contacted every 3 days

Thank you for your attention to these important guidelines. We appreciate your continued dedication and support of our patients and colleagues during this critical time.