STRUCTURING COVID-19 PROTOCOLS FOR PHARMACIES

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Introduction

We are facing an unprecedented challenge. COVID-19 has spread rapidly across the world affecting workforces, global economies, and everyday individuals. While the virus has seemingly turned the world as we know it upside down, good news is on the horizon. Through concerted efforts of social distancing in the United States, it appears that the "curve is flattening" and states are slowly beginning to reopen. With states reopening, pharmacies need to implement controls that will not only protect the safety and health of its employees, but also its patients.

The motivation for a pharmacy to properly reopen is obvious and includes: (i) the desire to take care of its patients; (ii) the desire to take care of its employees; (iii) the desire to keep its doors open; and (iv) the desire to protect itself from plaintiffs' attorneys who will likely come out of the woodwork six months from now and sue pharmacies for negligence.

The purpose of this white paper is to provide guidance to pharmacies on structuring an appropriate written protocol that implements necessary controls including: (i) what reliable governmental sources a pharmacy can turn to for COVID-19 guidance; (ii) recommended controls for pharmacy employees; and (iii) recommended controls for pharmacy patients.

Sources for Structuring Protocols

When structuring a protocol, a pharmacy needs to turn to reliable sources for COVID-19 guidance. One reliable source is the Centers for Diseases Control and Prevention (CDC), which continuously updates its guidelines for pharmacies. The CDC's published guidelines are available on its website. The Occupational Safety and Health Administration (OSHA) also has general guidelines and interim guidance for specific work groups and their employees. OSHA's interim guidance for health care workers is available here. Finally, a pharmacy should consult applicable state governmental agencies for published guidance on how a business may reopen.

While a pharmacy does not need to incorporate every available guideline, a pharmacy should diligently review and adopt guidelines that fit it the best. Further, a pharmacy should cite within its protocol the source for an incorporated guideline. Citations to a reliable source provide a pharmacy the argument that it took reasonable steps to protect patients and employees.

Structuring the Protocol: Pharmacy Employees

A pharmacy's protocol needs to adopt various controls specific to its employees. The protocol should touch on topics such as: (i) what PPE the pharmacy requires; (ii) how the pharmacy responds to a sick employee; (iii) cleaning and disinfecting procedures; and (iv) a description of general good hygiene practices employees should adhere to. The following are some example controls that a pharmacy may incorporate in its protocol:

(i)   Required PPE

A pharmacy may mandate the use of face coverings and gloves for all employees. In doing so, a pharmacy should ensure to make the PPE available to its employees. The protocol should also address the proper disposal, cleaning, and disinfecting of PPE.

(ii)   Sick Employees

There is no requirement to close a pharmacy if an employee is exhibiting symptoms or tests positive for COVID-19. Under its protocol, a pharmacy should require all employees to notify the pharmacy if they test positive for COVID-19 or are exhibiting symptoms. Further, a pharmacy should implement procedures on what to do if it receives notice from an employee that he/she tests positive for, or exhibits symptoms of, COVID-19. For example, a pharmacy should require the employee to self-quarantine for 14 days or until he/she tests negative for COVID-19. A pharmacy may also adopt the CDC's return to work criteria for health care professionals.

In addition to sick employees, the protocol should outline procedures for the treatment of employees who may have been in close contact with a suspected or positive COVID-19 employee. This may include notifying employees of possible exposure and closely monitoring the employees for symptoms.

(iii)   Cleaning and Disinfection

Pharmacies should also incorporate regular cleaning and disinfection procedures in its protocol. For example, the protocol could require that employees routinely clean and disinfect frequently touched surfaces or objects. Separate procedures may also touch on how to clean and disinfect a pharmacy if an employee tests positive for COVID-19. The CDC and OSHA have published guidelines on how to properly clean and disinfect workplaces.

(iv)   Good Hygiene Practices for Employees

While there is constant chatter about the need to practice good hygiene to help limit exposure to COVID-19, it is still in a pharmacy's best interest to include these practices in its protocol. The protocol should emphasize the importance of:

- washing hands with soap and water for at least 20 seconds or the use of hand sanitizer;
- avoiding touching the eyes, nose, or mouth; and
- covering a cough or sneeze with an elbow or tissue.

Structuring the Protocol: Pharmacy Patients

A pharmacy's protocol should also implement controls for patients who will enter the pharmacy. Specifically, the protocol should address (i) how an employee should handle sick patients, (ii) how to protect high-risk patients, (iii) the implementation of communication procedures with prescribing practitioners or with patients and (iv) the implementation of physical controls to encourage social distancing.

(i)   Sick Patients

It is inevitable that a pharmacy will encounter a COVID-19 positive patient on its premises; thus, the protocol should address various situations and applicable controls. For example, if a patient is exhibiting COVID-19 symptoms but does not have a diagnosis, then a pharmacy should advise the patient to get tested as soon as possible. Pharmacy employees should also encourage patients to sign up for home prescription delivery if available.

If a patient has a positive diagnosis, then a pharmacy may implement more stringent controls. Such controls may include directing the positive patient to a private, designated area of a pharmacy (or even to the patient's car). It may also include minimizing contact between the patient and the employee, and ensuring the employee has proper PPE while interacting with the patient.

After interaction with suspected or confirmed COVID-19 patients, a pharmacy should require employees to properly clean and sanitize themselves and any possibly contaminated areas after the interaction.

(ii)   High Risk Patients

A pharmacy's protocol should address how to ensure the safety and health of its high-risk patients. Such controls include posting signs on doors encouraging patients to return to their vehicles and call the pharmacy for services or use the drive-thru window. A pharmacy can also send notices to patients either by mail, telephone, or text messaging to inform patients of their options.

(iii)   Communication Procedures

A pharmacy should work with physicians and hospitals to set up a COVID-19 positive patient notification system. Such a system could be set up to help a pharmacy prepare for a patient needing a prescription. For example, proper notification could prepare a pharmacy to have patients receive their prescriptions through a drive-thru window, curbside pickup or through home delivery. This will help limit exposure to employees and other patients. A pharmacy could also work with prescribers to submit prescription orders via telephone or electronically rather than through traditional paper prescriptions. A pharmacy should incorporate all communication procedures into its protocol.

(iv)   Physical Controls

Physical controls also play a vital role in a pharmacy's protocol. The goal in implementing physical controls is to promote social distancing and minimizing the risk of exposure between patients and employees. Physical controls include:

- Installation of sneeze guards at pharmacy counters.
- Discontinued use of magazines or other shared items in pharmacy waiting areas.
- Closure of self-serve blood pressure units.
- Limiting the total number of patients inside the pharmacy's premises to prevent crowding.
- Placement of markers six feet apart on the floor for patients waiting in line for service.
- Requiring face coverings for anyone entering a pharmacy.
- Placement of hand sanitizing stations throughout a pharmacy.

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