

INFORMING READINESS AND RESPONSE TO COVID19 IN HOSPITALS AND PRIMARY HEALTHCARE CENTERS



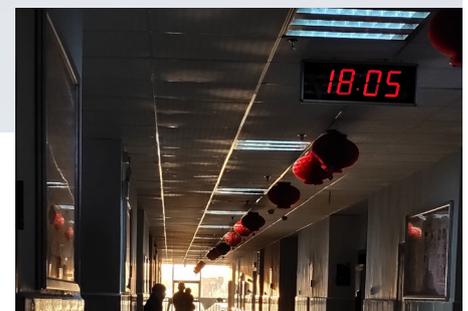
LEBANESE CONTEXT

- On March 11, 2020, the World Health Organization declared COVID-19 a pandemic, signaling to the world that continued spread is likely, and that countries should prepare for the possibility of widespread community transmission.
- The first case of COVID-19 in Lebanon was confirmed on 21 February 2020; since then, the number of cases has continued to grow exponentially.
- The total number of COVID-19 cases in Lebanon is likely higher than what is being reported due to inherent difficulties in identifying and counting mild and asymptomatic cases.
- Cases now comprise those that are travel related and those that are the result of internal spread, including occupational transmission.



CHALLENGES IN EXISTING HEALTH SYSTEMS

- Curative-oriented health system
- Public sector is underfunded, understaffed and ill-equipped
- Only 15% of hospital beds belong to the public sector
- Health information system in Lebanon is fragmented
- Poor engagement of private sector in early response
- Lack of clear enforcement of Infectious Disease Law (31/12/1957)
- Limited availability of needed supplies and equipment.



CONSEQUENCES OF DELAYED RESPONSE

If the outbreak is not contained in a timely manner, the Lebanese health system will be overwhelmed; patients with COVID19 or other urgent medical conditions will not receive their needed care, and a substantial number of unnecessary deaths will become inevitable

ROADMAP FOR ACTION IN HEALTHCARE FACILITIES

Infection control & outbreak management

- Implement strict measures in hospitals, which include developing signage at entrances to direct COVID-19 suspected cases, informing visitors and staff of respiratory and hand hygiene, daily cleaning and disinfection of environment
- Develop policies and procedures for outbreak management, a committee or team to support infection prevention and control, a plan to manage and address infection prevention and control and manage the outbreak and a surveillance system for early warning and monitoring in healthcare facilities
- Implement infection control measures in primary healthcare centers to prevent transmission of COVID-19 in the centers to other community members and/or healthcare workers
- Implement infection prevention and control standards from the hospital accreditation to reduce COVID-19 transmission within the hospital or from the hospital to the community, improve staff knowledge on infection prevention and control and support hospitals in responding to the outbreak.
- Proper handling of mobile healthcare equipment, laundry and waste, safe and effective cleaning and disinfecting, proper hand hygiene (for staff, patients and visitors) and adequate communication of COVID-19 internally and externally on the outbreak
- Equip triage area with personal protective equipment
- Implement strict isolation precautions in ICU
- Isolate patients in designated areas preferably in separate building from other hospital facility, separate patient flow (i.e. elevators, CT scans or X-rays, airborne isolation rooms)
- Patients waiting for their test results should wait in an isolation room until test results are out
- Collect medical waste generated into double-layer infectious waste bag, which should be treated with chlorine-containing preparation for at least 10 min before disposing of as infectious medical waste
- Implement contact, droplet and airborne precautions when performing aerosol-generating procedures
- Restrict visitors in healthcare facilities



Planning & referral

- Separate COVID-19 triage area from regular emergency department area / develop designated areas for COVID-19 examination and care
- Match expansion of healthcare facilities with sufficient staff to provide appropriate quality of care and staff/patient safety
- Re-allocate health-human workforce to the emergency room departments and/or COVID-19 management areas from other departments
- Postpone non-urgent appointment and operations in hospitals
- Strengthen primary healthcare systems to utilize the centers as community outreach support
- Set up a core team in hospitals that includes hospital management, infection control team member, infectious diseases expert and intensive care unit and emergency department specialists
- Implement prioritization of treatment for patient with or at risk of severe illness
- Implement clear referral channels to hospitals that are treating COVID-19 patients
- Identify equipped teams and ambulances to refer and transport patients with COVID-19

Clinical care & education

- Implement rapid and safe triage processes
- Provide comprehensive care for critically-ill COVID-19 patients that include antiviral therapy, respiratory support, circulatory support, immunity enhancement
- Disseminate self-care guidance for patients with mild diseases to be implemented at home with self-isolation measures



SUPPORTIVE RESOURCES FOR HEALTHCARE FACILITIES

CORONAVIRUS DISEASE 2019 (COVID-19)

CDC - COVID-19 Information for Healthcare Professionals

WHO - Country & Technical Guidance - Coronavirus disease (COVID-19)

Staff

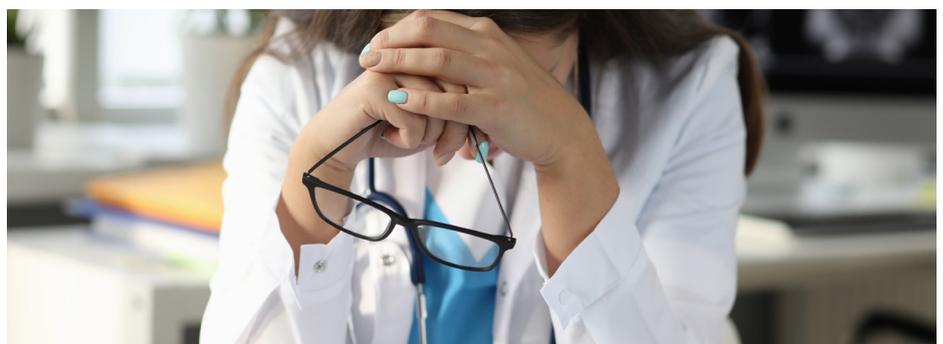
- Staff protection by asking staff to stay home if they have respiratory symptoms and conducting COVID-19 tests when needed
- Train medical and non-medical staff in hospitals, primary healthcare centers and social development centers on a regular basis on most up to date infection control measures including infection prevention and control, PPE measures, perform self-isolation if they were exposed and safe triage measures
- Medical staff should wear protective equipment during the screening process and implement rigorous hand washing
- Provide financial and non-financial support of healthcare providers to improve morale and strengthen resilience to healthcare providers to improve morale

Laboratory

- Implement adequate infection prevention and control measures for specimen collection and transportation
- Adopt standardized procedures to collect, manage and transport specimens and report test results without breaching patient confidentiality and privacy
- Implement strict infection prevention and control measures in laboratories to prevent transmission of COVID-19
- Ensure availability of primers, probes, positive controls, and personnel

Mental health

- Provide clear communication with regular updates about 2019-nCoV outbreak to both health workers and people to address their sense of uncertainty and fear.
- Set up secure services to provide psychological counselling using electronic devices and applications for affected patients, their families and members of the public.
- Ensure suspected and diagnosed patients with 2019-nCoV and health professionals working in hospitals caring for infected patients receive regular clinical screening for depression, anxiety, and suicidality by mental health workers.



RE-IMAGINING LEBANON'S PUBLIC HEALTH SYSTEM AND PREPAREDNESS RESPONSE

The world is witnessing the worst public health crisis in recent history, exposing deficiencies in public health systems and pandemic preparedness response.

COVID-19 experience is an opportunity to re-imagine Lebanon's public health system and preparedness response by reshaping efforts and making the right investment at the public health sector level, broader health system level, country-wide level, and globally.

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THE MEASURES TO PREVENT AND CONTAIN COVID19 ARE MULTI-SECTORAL. THE DELINEATION AND CLARITY OF THE ROLE AND RESPONSIBILITY OF THE VARIOUS SECTORS IS CRITICAL TO ENSURE EACH SECTOR EFFECTIVELY IMPLEMENTS THE MEASURES TO OVERCOME THE OUTBREAK



REFERENCE

El-Jardali F, Fadlallah R, Abou Samra C, Hilal N, Daher N, BouKarroum L, Ataya N. K2P Rapid Response: Informing Lebanon's Response to the COVID-19 Pandemic, Knowledge to Policy (K2P) Center. Beirut, Lebanon, March 2020