Associação das Pioneiras Sociais The SARAH Network of Rehabilitation Hospitals

# **SARAH Network COVID19**

Safety protocols for staff and patients



## **TREATING PATIENTS**

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The SARAH Network treats almost 2,000,000 people annually. With the onset and progression of the COVID-19 epidemic in Brazil, these patients cannot have their rehabilitation programs and medical care suspended.

The majority of the individuals admitted to, or seen at, the SARAH Network belong to high-risk groups whose lives would be especially threatened by a potential COVID-19 infection, such as the elderly, the immunosuppressed, patients with acute neurological conditions, with paraplegia/quadriplegia, or other associated comorbidities.

In an effort to continue rendering safe, quality healthcare to the population, we've implemented the following measures and protocols:

### COVID-19 Triage Protocol Prior to In-person Consult/Treatment

All individuals who go for in-person appointments at a SARAH Network hospital are submitted to a series of precautionary assessment measures. Upon arrival, they are evaluated by a registered nurse (RN) who 1) clears those who present no flu-like symptoms to proceed to their consult/treatment or 2) directs those with flu-like symptoms to a more extensive medical consult with a SARAH physician who recommends medication, domiciliary quarantine or admission to a hospital equipped to treat COVID-19, depending on the case.



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**In-person Consult/Treatment** Conducted by different specialists who use the Personal Protective Equipment (PPE) indicated for each situation.



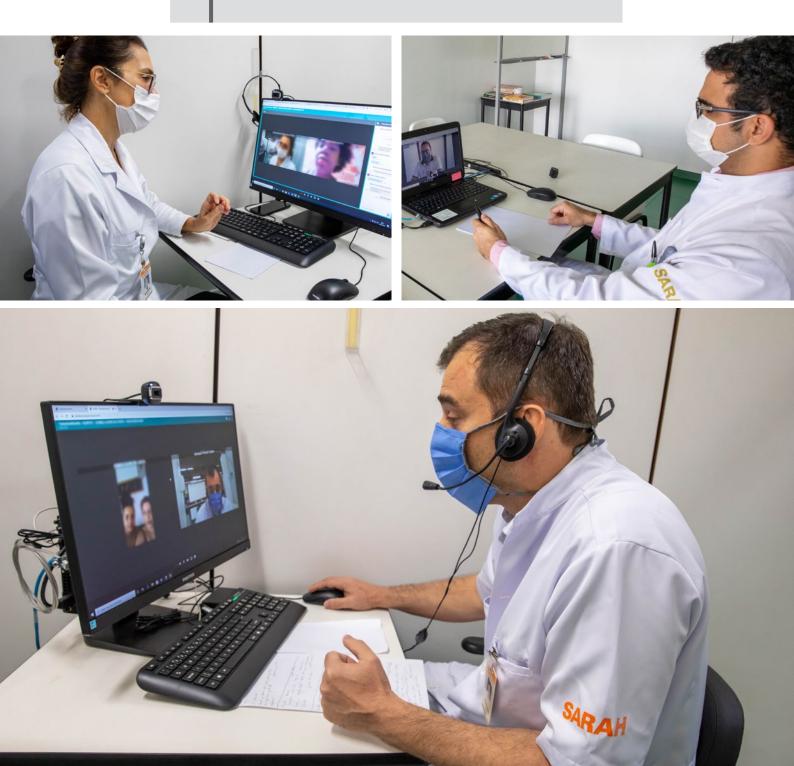




#### Telemedicine

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Remote and telephonic consults are available for individuals who need to continue their treatment at SARAH during the pandemic but prefer not to go to the hospital, or cannot go due to health issues. The Network implemented the necessary technology to conduct remote rehabilitation consults and activities. Since March 16 of this year to mid-July, 104,000 remote treatment and consult sessions have been conducted. This access to telemedicine has garnered praise from our patient population.



**Prescriptions for Medication Issued Remotely** All SARAH Network physicians underwent digital certification in order to renew or issue new prescriptions for medication, when needed, after the remote treatment or consultation sessions. Patients can download and print their prescriptions on the SARAH website [screenshot of the SARAH Patient Portal, below].

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#### **Patients Hospitalized at SARAH**

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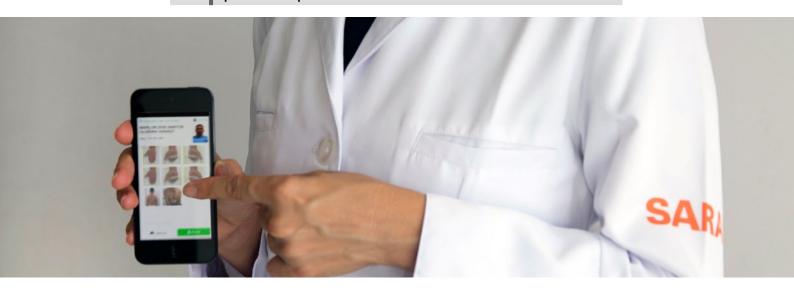
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Nurses, physicians and paramedical health staff don the required protective gear to continue their care of patients in the wards.



#### **Use of Smartphone apps**

Due to the common everyday use of these easy-to disinfect devices, healthcare professionals now access patient portals and charts via a recently implemented smartphone app, created specifically for this purpose. It was designed to ensure encrypted access, privacy - and, as importantly, equipped with covers that are constantly disinfected, which helps curtail the spread of the virus. Support staff, such as hospital maintenance workers, can order necessary supplies from, and send messages to, central management, thereby cutting down on person-to-person contact.



#### **H1N1 Vaccinations**

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To ensure greater safety, this flu vaccine has been made available to all patients, caregivers, and families at every SARAH Network facility.



#### **Prevention Campaigns**

There is ongoing, clear communication about the required application of all measures, protocols, and added care that must be exercised inside and outside hospital facilities to control the spread of viruses and infections. Below are examples of bulletins posted throughout SARAH facilities.





Infection control is in your hands

All SARAH staff are screened for Covid-19 Individuals who test positive are put on paid medical leave and required to quarantine at home, away from others (including family members). The Network's Division of Occupational Health provides ongoing support during the employee's period of self-monitoring. This is an essential practice in the containment of the virus, and an important way to protect our patients and staff so that we may continue to provide medical assistance to the population.

9



### **Pre-admission Triage**

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After completion of the triage questionnaire, all asymptomatic patients scheduled for admission undergo a COVID-19 test. Admission is only authorized after the return of a negative result. Patients with a confirmed or suspected COVID-19 status are asked to quarantine at home or are referred to a hospital that treats COVID-19.



#### **Triage of all SARAH Staff**

11

Upon arriving at the hospital and before starting their workday, all SARAH staff have their temperatures checked. In addition, they are asked a series of questions to ascertain their COVID-19 exposure risk: do they have any symptoms? Were they in contact with anyone with a suspected or confirmed case of COVID-19? When necessary, the employee is sent to the Division of Occupational Health, which takes the required steps and precautions befitting each case.





#### Areas Restricted to Management of Suspected/ Confirmed COVID-19 Cases Currently Hospitalized

In the rare instance that a patient, during their hospital stay, comes to develop symptoms associated with COVID-19, SARAH has designated a specific area and protocol designed and equipped to manage their condition, safe from other patients and attended to by a special team, until either quarantine or transfer to another hospital for treatment of COVID-19 is determined.





12



## **SUPPLY CHAIN**

In adherence to the guidelines set forth by the Commission for Controlling Hospital Infections, the Network's Purchasing and Supply Divisions have implemented strategies for guaranteeing the constant availability of Personal Protective Equipment (PPE) to every SARAH facility. In addition to all hospital medical, paramedical and support staff, PPEs are provided to all patients, visitors, caregivers and accompanying family members. Supplies of face masks, gloves, caps, safety glasses, booties, and sanitizing alcohol gel are checked daily and replenished immediately when stock runs below the preestablished minimum.

To reduce waste, PPE is distributed daily at specific sites within each hospital. Masks and gloves, for example, are counted out according to the person's need for the activity or job they will engage in on that day. This increases accountability and responsible use of PPE.

To further maximize supplies of precious PPE for which there is a huge demand worldwide, SARAH supplements its acquisition of these items from national and international suppliers with in-house fabrication of disposable and reusable face masks by its Sewing Department.



## **INNOVATION AND RESEARCH**

The SARAH Network was one of the first institutions in the world to prepare for and deliver medical assistance via telemedicine at the very start of the COVID-19 pandemic. Devices and equipment required for the extensive implementation of this mode of distance healthcare was launched at the first sign of a possible pandemic so that SARAH patients could still access their physicians and rehabilitation professionals and not suffer full interruption of the services they have come to depend on.

Contact with national and international institutions revealed that no other was able to attain SARAH's number of telemedicine consults in such a short period of time.

An evidence-based study is currently underway to assess patients' satisfaction with the remote healthcare service they were rendered.



