GUIDE TO REOPENING YOUR PRACTICE

*With the best information available as of 5/1/20*

The Guide to Reopening was put together with the assistance of a number of generous people who shared their knowledge and time. Thanks to Dr. Tim Bertelsman, Dr. Mario Fucinari, Dr. Nicole Ingrando, Mandi Karvis Esq., Dr. Karen Konarski-Hart and Michael Regnier Esq. Their contact information is included in the resource section of this guide.
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“Pre COVID-19” and “Post COVID-19” are Different Worlds

Like it or not, a global pandemic is a crash course in SWOT (strength, weakness, opportunity & threat) analysis: It quickly becomes apparent where you have challenges, and where you are strong. The start to 2020 has been a challenge to nearly every person on the planet, although we may have experienced the crisis in a unique way. That experience will frame how we make decisions and respond to everyday ideas through the coming years.

As chiropractors, our decisions around how we move forward will be the key to our ongoing survival as people, as business owners, and as part of the larger chiropractic community.

Whether you’re a sole practitioner, run a larger practice or group of practices, or are working as an associate or an independent contractor, you’re an entrepreneur. Some of you may think of yourselves as entrepreneur first, doctor second. Regardless, most entrepreneurs like action and need to feel they’re addressing challenges head on rather than letting external forces drive what happens to them.

One of the few ‘positives’ of the pandemic is that you may have time now that you did not have before to think about your business and develop an actionable plan to carry you through the next months and beyond.

This Guide to Reopening is a tool box intended to give you a starting framework you can apply and customize to your specific situation. It should provoke thought while highlighting ideas and opportunities you may not have considered.

Throughout this guide you will see reminders to check with your local and state authorities on all matters before proceeding. States determine their own rules based on their unique situation about how to navigate through the COVID-19 crisis. They are the ultimate authority on the rules for your location.
Start with the big picture

Don’t rush, don’t panic, but do plan

Big decisions are best made when you have as much information as possible. Decisions made too quickly tend to be either costly or outright wrong. But there’s also a difference between procrastination and taking time.

It’s a big challenge; take small bites

“Get back to pre-COVID-19 status ASAP” is all or nothing and can feel overwhelming and confusing. Instead, break it out into tasks that are manageable, and when achieved, can relieve a little of the pressure. “Ask landlord to split overdue rent across next 12 months.” Or “Talk to staff about staggered return.” are important, achievable and impactful actions you can take to help get some wins and make some progress.

Plan for today, tomorrow, next quarter and next year

Once you have a handle on priorities that must be managed immediately, think about what you can do next month. Then, what could you do after you’ve been open again for a few months. And, what would be smart to add or adjust in January?

Look through someone else’s eyes

Your patients’ lives have changed too. Put yourself in their shoes for a few minutes – if you can, do this with another person or your staff to get different viewpoints – and think about how they may have different needs for services you can provide, or how their expectations and experiences in your office may need to change to meet their needs.

Help them look forward

We’ve learned more about personal hygiene and protective gear in the last three months than most of us would have expected to learn in our entire lives. As you start inviting patients back into the office, demonstrate your commitment to keeping them – and you – safe with signage that instructs and reassures, and actions that support that knowledge. You can even start showing this before they reach the office in the way you manage scheduling calls, and social media.

Face your numbers

Revisit your historical financials to get a feel for where you would have expected to be now. Take a deep look at your monthly expenses and see if there are things you can drop, reduce, or put on hold. Be smart about the cuts you make; now is not the time to stop marketing or cut your whole staff. You still need to communicate with your patients and find new ones, and you still need to provide an exceptional patient experience.
People are your business and staff are people

Regardless of what you do, people remember what you do, for good or bad, so try to be kind and thoughtful as you communicate your plan. Loyal employees are a key part of the team and their role in the overall patient experience needs to be thought through. If you find you must permanently let staff members go, be kind. Do your best to retain those who bring the best experience to your patients. Think about whether you can bring them back now on a reduced schedule, if necessary, and offer incentives or loyalty compensation once things are on solid ground again.

Leadership in a time of stress

It’s important to inspire your team by planning and sharing an optimistic view of a future they are invested in, and calling on them to be part of the solution. Practical actions makes your staff part of the solution, empowering them to play their part for their own and the greater good.

Get back to working on the business vs. in the business as soon as possible

At first you may be tempted to try to do everything yourself to save money. While this is a good time to look for fluff or unnecessary expenses, be careful. The money you would spend to hire the lawn mowed vs. what you would bill for the hour or two it would take you to do the work yourself should drive your decision making. Prioritize actions that will make money – immediately, or in the near future – over actions that cost effort but do not yield financial benefit.
Phases of Reopening (full government guidelines here)

In all phases, adhere to Department of Public Health and CDC guidelines for self-isolation when traveling, even across state borders

Phase I In the workplace
- Continuing to encourage telework
- Return staff to work in phases if possible
- Close access to common areas, and/or enforce strict social distancing
- Minimize non-essential travel
- Consider special accommodations for staff who are members of vulnerable populations

In the community
- Schools and organized youth activities remain closed
- Visits to senior living facilities and hospitals should be prohibited
- Large venues (concerts, sit-down dining, places of worship) can reopen with strict physical distancing protocols
- Elective surgeries can resume
- Gyms can open if they adhere to strict physical distancing protocols
- Bars should remain closed

Phase II In the workplace
- Continuing to encourage telework
- Close access to common areas, and/or enforce strict social distancing
- Consider special accommodations for staff who are members of vulnerable populations

In the community
- Schools and organized youth activities may reopen
- Visits to senior living facilities and hospitals should be prohibited
- Large venues (concerts, sit-down dining, places of worship) can reopen with strict physical distancing protocols
- Elective surgeries can resume
- Gyms can open if they adhere to strict physical distancing protocols
- Bars may reopen with reduced standing-room occupancy and physical distancing

Phase III In the workplace
- Resume unrestricted staffing of worksites

In the community
- Visits to senior living facilities and hospitals can resume
- Large venues (concerts, sit-down dining, places of worship) can operate under limited physical distancing protocols
- Bars may operate with increased standing room occupancy
Revisit policies & procedures

Insurance Concerns

If you’ve taken advantage of a “Leave of Absence” in your malpractice insurance policy, do not see a patient until you’ve returned your policy status to normal. You will not be covered until you do.

Remember to notify your insurance provider(s) when you change your status Part-Time to Full-Time practice.

Auditing & Monitoring practices

Now is the time to revisit your compliance policies and procedures, identify any gaps or areas to improve with a risk assessment, refresh your memory on outstanding items, and look for ways to improve going forward. Pull some charts and ask yourself, “Does this record look complete? Would I be proud to put this up in a court of law? How would I feel if an insurance company pulled this record and said, can you substantiate what you billed?” Do a self-audit and look for items that might raise concerns. If you don’t know what concerns to look for, find an expert that can.

Document Everything

If you only remember one thing, it should be this. It all comes down to a good faith effort to be compliant with policies and procedures. If you set a process, use the process and document that you use the process. This is especially useful for telehealth. If you don’t document, you can’t show a good faith effort.

Updated Processes and Policies

Depending on CDC guidelines and your local community directives you may need to continue physical distancing. Think through your processes from all relevant angles:

- The first time patient experience.
- The returning patient experience.
- The telehealth patient experience.
- The staff experience.
- The doctor experience.

Will you be doing things differently? What needs to be updated for safety? Write out a plan for each experience, noting any new or changed steps in the process. Make sure the change is clearly documented. This is important for training, and also should there ever be a malpractice claim or board action against you.

Think through how you will communicate the new processes to your staff. Ideally you will walk them through the new processes via a virtual training session before they return to the office, so they understand what will happen before they’re on site. If staff responsibilities have been redrawn, document and ensure each team member has their updated work plan.
Next, determine how you will communicate these processes to patients. This is additional training for your staff, as well, as they will likely be responsible for explaining the system to your patients. They might do this on the scheduling call, or follow up with an email. Instructions could be texted. Each office will need to make their own decisions on how best to communicate, based on the needs and expectations of their patients.

Once you have established a policy, you must follow it. For example, if your policy is that everyone will check their temperature each morning, you need to ensure you have sufficient probes. Create a daily log to track (and document) results. If you are going to have hand sanitizer at the desk, and in the rooms, and in other locations in the office, you need to be sure you have enough hand sanitizer to continue the policy. Make sure whatever plans you put in place are able to accommodate the scale at which you intend to practice.

**Have Your Cleaning, Emergency Response, and Communications Plans Available**

Once you have created your COVID-19 cleaning and response training plans, document them and make them available to patients. Prepare a Crisis Management Plan which will include how you communicate with patients if you need to close the office.

**Don’t Forget PPP**

Don’t forget to track your spending for PPP purposes, particularly important as you’re bringing back the staff or hire new ones be sure you document for the PPP.

**RESOURCES:**

- Beware of OCR Scam Asking for Personal Health Information
- Joint Commission Approves Homemade Face Masks
- The Federal Trade Commission’s Response about Checks from the Government
- How to Avoid a Coronavirus “Phishing” Scam in Your Practice
- Protect Your Practice from Coronavirus Info Security Risks
- HIPAA Reminder - COVID-19
- Webinar HIPAA Matters During Coronavirus by Mario Fucinari
- Are You Ready for an Emergency
- Crisis Communication Plan
Communication

Staff

Hopefully you’ve stayed in communication with your staff during this time. For some of you, you’ve remained open but may have reduced staff hours or furloughed some. For others, you may have furloughed the entire team. And some may not have reduced staff at all.

If you’ve had a good working relationship in the past, you and your team have likely developed a mutual sense of loyalty. But that loyalty can be tested without open and regular communication.

Regardless, your team needs to hear from you. They need to understand how you see the future, what you expect the short- and long-term impacts to be, and how it will affect them and their place with your organization. They also need to understand new processes and procedures that need to be implemented, and will need training on effectively managing those for themselves and patients.

Find and follow guidelines set by YOUR state and city.
They are the ultimate authority on the rules for your location.

Patients

Even if you’ve stayed open and busy during the pandemic, you should develop a plan to let your patients know how you’ve adjusted the office experience to their benefit.

If you’ve been closed, or only seeing emergent patients, you’ll need to make people aware you’re back to regular hours and are looking forward to seeing them. Reassure them of the steps you’ve taken in the office to keep them safe.

Whether you continued to see patients or did not, it would be smart to do a Facebook live or create a simple video explaining any new processes, giving them a tour of the office and treatment rooms to show how you will engage with them and how you will maintain a clean work environment, and noting anything that may have changed since they were last in. If you see a lot of seniors or at-risk individuals, consider setting aside a day or two just for them.

Vendors

As you’re making plans to reopen, include vendors in your communication plan, including your insurance providers.

There’s a possibility your supply chain vendors may not open on the same timeline you do, depending on their location and state’s rules. Service or delivery people will need to be aware of your hours, if they’re not the same as before.
If any of your vendors have put your account on pause during the crisis, let them know you’re preparing to resume normal activity. A quick check in with your banker and accountant could be useful, as well. If you found yourself struggling to get through the PPP process because you don’t have a strong banking relationship, now is a good time to work on that.

Creditors and Investors
Since everyone is in the same boat, let creditors and investors know as soon as you can about your plans to continue the business. Investors will be reassured, and creditors will feel more secure about their ability to manage their own financial obligations.

Public
In the past fear has gripped the public, but for many, pain is taking over. People could potentially be more focused on personal health and wellness than ever before, and this may lead them to explore new opportunities to strengthen themselves. Have empathy – this is the first event of its kind where we are all experiencing trauma together. Put your best self forward for these folks. Update your website and social media channels to talk about health and wellness offerings. The public is going to scrutinize your office’s sanitation practices so show them off. If relevant, talk about how you are a good community participant and support efforts that improve health as a whole. Be present. Be kind. Be encouraging. Be truthful.
Staffing

Particularly if you need to restructure your staff for the short-term or long-term, look at your employee policy manual and ensure job descriptions match expectations. Revisit employee tasks list and workflows and if necessary, refine them.

Before you reopen, hold virtual training sessions with staff to go over new policies and procedures, and talk about scheduling issues and patient workflows. At first these virtual trainings may need to be done weekly as all of these guidelines are so fluid.

Consider how you can think differently about staff time and capacity. Can a team member do a pre-consultation triage by phone? This would be comfortable for the new patient and save time for you. What staff/positions worked well from home? Can they be transitioned to full time work from home?

What can be done outside of the box? Be open to staff ideas and suggestions. What can your team do from home? Look at what information could be stored in your home office in case an emergency or crisis keeps you from your work location. It is expected we may have a resurgence of COVID-19 or the next novel virus. What is your contingency plan?

If you’re going to reduce staff, determine what responsibilities can be shifted, and what new training will need to be provided to ensure each person has the knowledge and skills they need to provide a successful patient experience.

Whatever decisions you make, be upfront and clear with your team. If you’ve worked together for any length of time there is likely loyalty on both sides. The best way to maintain that relationship is to be empathetic and compassionate and communicate as clearly and openly as possible.
Health & Safety

Demonstrate that you have a plan to protect the health and welfare of your patients and employees.

Before reopening

- Deep clean every surface. Spray the fabric with a cleaner that has been approved by the CDC or your local / state DPH.
- Consider purchasing high efficiency air filters to keep air circulating.
- Take photos or videos demonstrating what you’re doing. Demonstrate that when regulatory restrictions are eased, you can accommodate physical distancing for both staff and patients.

Checklist for yourself and your team

- Have a screening checklist that guides you through the scheduling call. Even though the immediate threat will be less, it is still important to understand your patient’s potential exposure. Ask:
  - If the patient has traveled to or been in contact with someone from outside the United States
  - If they have traveled to or been with somebody from one of the US hot spots - New York, New Orleans.
  - Whether they have been near a person that they know is infected recently
- Provide and require staff to use appropriate personal protective equipment. “Appropriate” may change as your state moves to different phases of reopening.
- Set guidelines to monitor employees’ health for potential symptoms in compliance with applicable laws.
- If possible, define workstations that provide a 6’ safe zone around employees.
- Require employees stay home if they are sick.
- Provide alcohol-based hand rubs containing at least 60% alcohol in the reception area, bathrooms, outside treatment room door and in treatment room.

Find and follow guidelines set by YOUR state and city. They are the ultimate authority on the rules for your location.

Create a system

- Create and implement protocols for disinfecting the workplace on a regular and systematic basis.
- Document your protocols.
- Set limitations on the number of people inside of your business at any given time.

Staff and Patient PPE

- Once you’re approved to reopen, you may reevaluate some of the CDC’s Personal Protection Equipment requirements, but should you? Decide what you will slowly phase out and what you might choose to continue into the future.
• Again, think about what experience will make your patients feel safe and comfortable. Reducing visitors in public areas could be a good start. Should you ask patients to wait in their cars until their scheduled appointment time? Limit people in the treatment room? Decide what you will slowly phase out and what you might choose to continue into the future.

• USE EPA-approved cleaners. While we appreciate the desire to use natural cleaner, they do not have what is needed to kill the virus. The cleaners must have chemicals approved by the EPA, which you can find on this list.

• Sanitize ALL equipment. Make sure you clean ANY equipment that is used with ANY patient between seeing patients. This includes the adjusting tables, massage tables, instruments used for treatment, etc. We do not yet know how long the virus can live on hard surfaces. Frequently disinfect phones, keyboards, copiers, etc.

• Remove waiting room “extras.” That includes reading material and magazines. For doctors that treat pediatrics, pull all toys, games, and books out of the waiting room. Clean and store them until this situation is stabilized. There may be a later recommendation to acquire new items, depending on what we learn about the virus.

• No touch is best. Provide no-touch waste receptacles in all areas of your office and exam rooms.

• Mind the details. Thoroughly disinfect door handles, light switches, counter tops, writing tools after each patient.

• Patients will be comforted seeing you practice safety in the room. Wash your hands, use sanitizer, don and doff new gloves in clear view.

Scheduling
• Determine your practice policies around scheduling and communicate them to staff, patients and vendors who might come into your office space.

• Offset patient appointments

• Request that unless a family member is needed in the room, they wait in the car

• If you open your waiting room, remove extra chairs to enforce physical distancing and continue to follow safe distancing guidelines
Take inventory of your equipment and supplies.

- Are you low on any key items? Vendors may be experiencing delays so order sooner rather than later, and look for potential alternative suppliers for emergencies.
- If you sell supplements or other products with an expiration day, check your stock to be sure all items are still within the appropriate dates.
- Are there new items you will need going forward that you need to find a supply source – i.e., thermometers, table covers, sanitizers?

Vendors and Service People

- Post a notice at entrances advising vendors and service people (post office, delivery services, equipment servicing, cleaning crew, and shredding companies) to be appropriately dressed when they come into the office. You may need to provide facemasks, booties and gloves. Depending on how items are delivered, consider wiping down packaging upon receipt.

RESOURCES:

Sanitation Guidelines and Best Practices for Risk Management in Your Practice

COVID-19 Resources in 30+ Languages

COVID-19 Practice Exposure - Communicating With Your Patients

How to Discuss Coronavirus with Patients

Helpful Information to Share with Patients

**Financial planning**

A key to long term survival is learning how to “run lean” during good times and bad. You’ll come out stronger because you have learned to spend money efficiently and use your financial resources in ways that bring the most return on your resources.

Understand your costs of operation. You should know how many patient visits it takes for you to stay in business. If you know what your overhead is and you know how many patients you need to see each day or week to earn that, you can more accurately plan your reopening activities to deliver the results you need.

You may realize you need to plan a staggered staff schedule to start. If you can, speak with each team member one-on-one to get a feel for their must-have requirements and any personal flexibility they can offer. For example, one person might be willing to trade working from home part-time rather than coming to the office full time. Knowing each person’s needs and willingness to be flexible will allow you to make the best possible decisions for everyone.

Can you consolidate office hours to reduce some overhead? Could you make your space available to another provider on a rotating schedule to share expenses? Some DCs, or symbiotic practices, might have had to give up their locations during the crisis. Look for opportunities to create a win-win.

Speak with your vendors, including your landlord, equipment leases, and utility companies. If you’re running behind, or feel you won’t be able to make a full payment, ask if you can pay the outstanding amount over a few months. Get any agreements in writing.

If you have received a Payment Protection Program loan, it is very important to track your expenses to demonstrate you have met the qualifications to have the loan forgiven. The loan proceeds must be used to cover payroll costs, and most mortgage interest, rent, and utility costs over the 8 week period after the loan is made; and employee and compensation levels are maintained.

**RESOURCES:**

[Federal and State Resources for Chiropractors]

[What You Need to Know About the Paycheck Protection Program]
Marketing is a Plan, not an Activity

The 5 Steps of a Customer Journey

There are similar phases to any marketing effort, whether it’s for a perfume brand or amusement park or your chiropractic office. You must address these questions before you can implement an effective marketing plan so you can apply the correct lens as you think through how you’ll go forward.

2. Evaluation: How can you help patients evaluate your practice’s value proposition so they know you are a good choice for them?
3. Purchase: How can you make it easy and clear for patients and customers to purchase specific products and services? Think about this from both an in-office perspective and an ecommerce perspective. Do you have a way to sell products online?
4. Delivery: How will you deliver your value proposition to customers and patients in a way that is as frictionless as possible? What can you do to help them feel comfortable and safe in your office?
5. After Sales: How will you provide post-purchase customer and patient support to encourage both repeat business and word-of-mouth referrals?

Use the “Jobs to be Done” Framework

One of the most effective ways to develop a successful marketing plan is to think about the “Jobs to be done” for your patients. They don’t want to find a chiropractor; they want to stop their back pain. They don’t want to improve their posture; they want to feel better when they’re working from home. The job to be done is the problem solved, not the work that is done to achieve it.

For example, if you want to do more sports team work, think about the jobs that need to be done for athletes and develop a plan to communicate your ability to fill those jobs.

Be Proactive, Not Reactive

Pull up your patient list for the last six months (or three years). Go through the list and call each person. Ask them how they’re doing. Reassure them. Suggest they follow you on social media to get tips on self-care and wellness. Let them know you’re there for them, and what you’ve done to make the office a safe and comfortable place to visit. Don’t push, just be present.
Health is the New Strength

Now is an excellent time to look at things to add to your skills toolbox. What can you learn, especially activities around daily living? What advice and techniques can you offer patients to improve their lives and well-being? What jobs can you do for them?

Post COVID-19 marketing should not be designed around billboards. It should be focused on relationship-building. Anything that is relationship based can pay significant dividends.

Think Outside Your Box

If you’ve thought about collaborating with other medical professionals to your mutual benefit, now is the time to begin to establish those relationships.

- Allopathic primary providers (MD, DO, NP, PA)
- Allopathic specialty providers (Ortho, Neuro, OB/GYN)
- Alternative providers (MT, ND)
- Other chiropractic clinicians

You might have to do some work to persuade a doctor that there’s value in working together, but you should look at this as an opportunity not just to expand your practice but also to broaden your own skills. The key to success here is listening.

Ask what their concerns are when they say “I don’t like chiropractors.” If they say, “When I send a patient to a chiropractor, I never get a report.” you know how to solve that and you can say so. “It sounds like communication is really critical to you. I can’t wait to tell you how your patient is progressing. Can I send you an initial narrative and a discharge report?” The MD will likely respond, “Well, yeah, that’d be great.”

Once you’ve pushed past the discomfort of having a persuasive conversation and found some success, you’ll discover all sorts of uses for your newly acquired skill.

Look for opportunities to introduce your value into the community. Schedule a lunch and learn for a law firm that specializes in personal injury. Speak at chamber of commerce meetings. Participate in women’s health or local sports health events. Build personal relationships with professionals at clinics and specialty medical practices. Look for opportunities to create win-win outcomes for each other.

RESOURCES:

What Can You Do To Work on Your Practice Right Now?

10 Ways to Stay Connected With Your Patients
“Look to the helpers”– Helping in a Crisis

While the world’s focus may be on COVID-19, Mother Nature doesn't rest, as we’ve seen with recent devastation by tornadoes. Here are ways you can help during a medical emergency or natural disaster.

DCs are medical professionals, which means you have a role to play during large medical events – and sometimes even before. When California issued a call for medical volunteers in response to the COVID-19 epidemic, Doctors of Chiropractic worked with their state association to have DCs added to the database. Ohio and Colorado followed their lead and also ensured their doctors were empowered to help.

There are a number of ways your training, experience and resources can be used to benefit your community during a crisis.

Identify, Triage or Treat

You may be the first to recognize a disaster. The first signs and symptoms of epidemics (and even bio terroristic agents) are often malaise, aches, headache and low-grade fever — all of which are common presenting complaints in many chiropractic patients. Additionally, most chiropractic patients are seen multiple times in close succession, which allows for recognition and tracking of trends in individuals and populations. It’s required under HIPAA to have an emergency procedures mode of operation.

Providing evacuation site assistance. Because you are trained in administrative skills, history-taking, screening and recording, you may work at an evacuation site doing basic care, screening, or administrative tasks similar to Red Cross Mass Care.

Use your training at emergency or disaster sites. Should you be first or early to the scene of a disaster site, you may be called on as first-responder to use your emergency skills.

Help treat disaster workers. Two of the most common problems faced by those working in a crisis – doctors, nurses, first responders, and others – are stress and musculoskeletal injuries. Chiropractic physicians are uniquely trained to deal with those issues with minimal equipment in situations where pharmaceuticals are not appropriate or not available.

Make sure the caregivers are caring for themselves. This could mean providing “rehab” i.e. assessment, treatment or referral of workers for hydration, nutrition, injury, stress, psychological issues, etc.

Replace a doctor who is sick or needed elsewhere. If another doctor gets sick or is volunteering and unavailable to treat their regular patients you can step in to help. You may also serve as Locum tenens for other doctors who are serving at the site or offer office space to those whose buildings have been damaged.

Offer Your Resources

Your office may be the only healthcare provider or facility available after a disaster, especially in rural areas, or in the case of quarantine, destruction or contamination of the local medical center. If you’re in a small town where you have a single hospital or a medical center, you could become the place where other medical professionals can see non-infectious people.
**Offer your office as a secondary medical facility.** Because many DCs have X-rays and other diagnostic equipment, your practice could become an alternative when other clinics or providers are overextended or designated for specific cases. You can provide supporting services within your scope of practice.

**Serve at drive-up testing locations.** In cities where drive-up testing becomes available during a pandemic or other medical emergency, your medical skills will be in demand as staff is needed to administer testing at multiple locations.

**Organize collections of needed goods and money, organize team schedules, or serve as the communication link.** Some of the best ways to help are also the simplest. Designate your practice as a drop-off spot for donations of masks, PPE and food. If you own your building and have a parking lot, allow temporary medical personnel to park their camper or RV in your lot overnight.

**Before & After the Crisis**

**Serve on a “readiness” team** at sports events, political rallies, concerts or fairs. Hopefully you won’t be needed, but you can be at the ready in case something does happen.

**Provide support post-event as a member of a debriefing or assessment team.** Your expertise and observations could help provide unique insight into how to improve responses and reactions next time.

**Work on special teams.** Taskforces and committees may arise around issues such as radiation screening, decontamination, creating a strategic national stockpile, etc.
Telehealth

The first step, and one of the most important pieces, is to refine your plan and make sure that anything you’re implementing is HIPAA compliant right now. During the crisis there have been lots of exceptions made; some states have granted exceptions, and insurance companies have been reimbursing for things they may not normally. You must monitor your state’s rules around licensing; these exceptions may last a week, a month, or forever, but it’s up to you to be aware of changes.

It is also important to go through your processes and be sure that everything you’re doing via telehealth is legal under your state licensing, and that you have implemented a HIPAA compliant platform for your billing in a way that’s going to be compliant long-term for the patient’s insurance company.

Once you’re confident you’ve got your T’s crossed and I’s dotted, let patients know you can provide telehealth support. At the end of each in office visit, say something like, “Mary, if that advice was helpful, don’t forget I can deliver this sort of advice on the phone should there ever be another crisis. If for some reason you can’t come in to the office, I want to make sure you and I continue to connect.” The patient now knows that it’s possible to transition to telehealth at some point in the future. And it’s easy to make this conversation part of your regular conversation with patients during in-office visits.

Find and follow guidelines set by YOUR state and city.
They are the ultimate authority on the rules for your location.

You can also contact patients who are already on the books and maybe not able to come in because of the COVID crisis or for any other reason. Educate your staff and the patient about the value that can be delivered via telehealth.

You will need to create an informed consent form for telehealth. Make it a fillable form with fields that are easily filled out, using a tool such as Word or Adobe PDF. Notify them that telehealth services may not be paid by their insurer. Let the patient know you’re going to provide the service and will bill the insurance company if they have benefits, but you can’t promise they’ll pay, in which case the patient will be responsible for settling the charge.

One of the keys is making sure the patient knows everything that’s going to happen. It is important to set their expectations ahead of time because this is new and may feel very different. The first time, have a staff member call to be sure they know how to log on. Be sure they understand the importance of being on time. Talk about how long it’s going to take. Talk about the types of things that will be discussed. And make sure the patient has something in their hands afterward that helps them feel value was provided during the visit.

You should expect the first time to take a little longer. There’s a learning curve for them to adapt to the new method of engaging, and you’ll also need to learn how they respond and react in this new environment. Have staff keep in touch with the patient if you are running late.
If you’re thinking about dipping a toe into telehealth, remind patients at the end of each in office visit. “If you want to talk through exercises to help that knee, we can set up a virtual conversation.”

**RESOURCES:**

Webinar: [The Swiftly Changing Telehealth Environment](#) by Tim Bertelsman

[Telehealth Supplement](#)

[Patient Consent Guidelines for Telehealth](#)

[Things to Consider Before Including Telehealth in Your Practice](#)
Resource Guide

Dr. Tim Bertelsman, Chiropractic

Dr. Mario Fucinari, Ask Mario

Dr. Nicole Ingrando

Dr. Karen Konarski-Hart

Mandi Karvis, Attorney at WickerSmith

Michael Regnier, Attorney at Eastman & Smith

Websites:

NCMIC.com/COVID-19

Mental Health Resources for Health Care Providers

Coronavirus and Forbearance Info for Students, Borrowers and Parents

CDC Cleaning and Disinfecting Your Facility

CDC Communication Resources

CDC How COVID-19 Spreads

World Health Organization: Q&A on Coronavirus (COVID-19)

John Hopkins University COVID-19 Dashboard

State Chiropractic Associations

State Health Departments

State Licensing Boards

OSHA Enforcement Guidance for Recording Cases of Coronavirus

OSHA Health & Safety Topics COVID-19