

## **The activity of the territorial phthisiopneumology service under the response to the exceptional situation of the COVID-19 epidemic**

As everyone comes together to tackle the COVID-19 epidemic, people undergoing treatment for tuberculosis (TB) and those who have had TB in the past represent a high risk group for COVID-19 and should be fully protected from interaction with third parties by separation under home-quarantine and by avoiding travel by public transportation. Home quarantine increases the intradomestic exposure of household members in case of lack of adherence to treatment. On the other hand, under conditions of response to COVID-19, healthcare workers in the phthisiopneumological service and primary health care are additionally required to monitor and screen patients for presumptive positive cases of COVID-19. This fact requires adjustments in TB case management in the outpatient settings.

### **1. General recommendations:**

- 1) Medical and non-medical staff who interact with people who visit healthcare institutions should wear protective equipment at the workplace ( N95, FFP 2 respirators or surgical masks, gloves, etc.), should observe hygiene and disinfect hands.
- 2) If two and more persons share the same office, they should adjust the work schedule in such a way that there is only one person working at a time in the office.
- 3) Disinfection of the work surfaces should be carried out every 2 hours and at the end of the workday.
- 4) The patients should be admitted into health institutions only with masks and/or they should be assured with a mask during their stay and should be provided hand sanitizers when entering the institution and/or health service offices.
- 5) The visits should be scheduled in order to avoid crowding of patients in the office. The 1.5 - 2m social distance should be ensured on the corridors
- 6) The visit of the staff from the primary healthcare for taking the medicines should be scheduled in advance to avoid contact with other people.

### **2. 2. Recommended activities for the coordinator of the Territorial Tuberculosis Control Program**

- 1) Inform the staff about COVID-19 infection: symptoms, transmission routes, prevention measures (equipment and rules on its use, recommended disinfectants, the algorithm for addressing the medical system, etc.);
- 2) Estimate the need for protective equipment necessary for the healthcare team based on their activities and submit the request to the institution executives. The following should be taken into consideration:
  - Use of medical masks: the respirators should be used until the elastic band gets loose, the masks should be worn by the healthcare workers for the entire period of interaction with the patients, and be changed when they get moistened, but not less often than every 2 hours
  - Hand hygiene - ensure the continuous supply of soap and disinfectants, including products packed in small bottles so that the staff can carry them if they have to visit patients at home.
  - Wear medical gloves while interacting with patients
  - In addition, assure the supply of disposable medical gowns with long sleeves and protective glasses to be used at the interaction with suspicious cases for COVID-19.
- 3) Identify and provide a separate waiting area for suspected cases of COVID-19
- 4) Conduct organizational meetings with physical interaction only if strictly needed and as frequently as possible coordinate the activities by telephone, e-mail, etc
- 5) Suspend any kind of group activity inside or outside the phthisiopneumology service and seek ways to organize them remotely with the help of digital technologies.
- 6) Adjust the working hours of the employees in order to reduce the office time as much as possible.

### **3. Activities recommended to the psychologists**

- 1) Activities related to counseling patients, family members, assessing the risk of non-adherence, etc. will be carried out by telephone or through other available digital communication means.
- 2) The information, communication and education events with face-to-face interaction will be suspended until the code red situation ends.
- 3) If necessary, organize the counseling sessions for the healthcare staff

### **4. Activities recommended to the social workers.**

- 1) Identifying social issues should be done by telephone through discussions with the patients, relatives, neighbors, representatives of the local public authorities and should be addressed remotely.
- 2) Solving the social issues should be carried out remotely as often as possible: the request for provision of identity documents, the request for social/material support, etc.
- 3) Support the home-isolated patients in the use of food vouchers.

**5. Activities recommended to DOT nurses.**

- 1) Monitor that all TB patients under ambulatory conditions receive continuous treatment by communicating with primary care workers. In case of offering treatment within the service facilities, the patient visits should be planned in order to avoid the crowding and the long waiting period in the healthcare institution and make sure that the rules of personal protection are complied with.
- 2) Ensure the administration of the treatment at home to the patients who cannot move around, who are on quarantine, who live in localities without a medical worker or where the medical workers have been outplaced to fight the COVID-19 infection, observing the personal protection rules (mask/respirator, glasses, gloves, disinfectants, social distance etc.).
- 3) During the DOT treatment at home visits, the healthcare worker should screen the patient and the family members for TB and/or COVID-19 suggestive symptoms.
- 4) Record any adverse reactions in patients receiving DOT treatment and communicate with the phthisiopneumologist doctor about further actions for their removal.
- 5) The treatment should be provided in the healthcare institution with due scheduling of the patient's visit in order to avoid large crowds.

All specialists, in case of suspected infection with COVID-19 in the monitored patients or the persons in their environment, will inform the TTCP coordinator with the subsequent actions established by the central health authority. Monitoring visits will be suspended for the period of emergency order. During the code red response, the staff should ensure home delivery and supervision of the home treatment for people who cannot move without minimizing the risk of exposure to COVID-19 and are on home quarantine in localities where primary health care cannot ensure adherence to treatment. For the daily travel in the territory, the administration should provide regular transportation.