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Standards for COVID-19 Fever Clinic

Version 1

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Health Policies and Standards Department

Health Regulation Sector (2021)

INTRODUCTION

Health Regulation Sector (HRS) forms an integral part of Dubai Health Authority (DHA) and is mandated by DHA Law No. (6) of 2018 to undertake several functions including but not limited to:

- Developing regulation, policy, standards, guidelines to improve quality and patient safety and promote the growth and development of the health sector.
- Licensure and inspection of health facilities as well as healthcare professionals and ensuring compliance to best practice.
- Managing patient complaints and assuring patient and physician rights are upheld.
- Managing health advertisement and marketing of healthcare products.
- Strengthening health tourism and assuring ongoing growth.
- Assuring management of health informatics, e-health and promoting innovation.

The Standards for COVID-19 Fever Clinic aims to fulfil the following overarching DHA Strategic Objectives and Program within the Dubai Health Strategy (2016–2021):

- **Objective 1:** Position Dubai as a global medical destination by introducing a value-based, comprehensive, integrated and high-quality service delivery system.
- **Objective 2:** Direct resources to ensure happy, healthy and safe environment for Dubai population.
- **Strategic Program 10:** Excellence & Quality, which promotes excellence in healthcare service delivery in Dubai while enhancing patient happiness, experience, satisfaction and trust.

ACKNOWLEDGMENT

The Health Policy and Standards Department (HPSD) developed this Standard in collaboration with Subject Matter Experts and would like to acknowledge and thank these health professionals for their dedication toward improving quality and safety of healthcare services in the Emirate of Dubai.

Health Regulation Sector

Dubai Health Authority

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EXECUTIVE SUMMARY

This is the first edition of the Standards for COVID-19 Fever Clinic. This document is based on current knowledge of the situation globally on Covid-19 pandemic and is aligned with current international guidelines and circulars issued by DHA related to the subject. The purpose of the standard is to ensure public and patient health protection and to ensure efficiency and integrity of healthcare services applied to handle suspected and confirmed cases of COVID-19, in facilities under DHA's jurisdiction. DHA will update the standards as new information becomes available.

Fever Clinics are dedicated facilities to assess, test, treat and reassure people, and where necessary, to triage them through the healthcare system, during the COVID-19 outbreak in Dubai. These clinics are established to divert COVID-19 suspected and confirmed individuals away from emergency departments and general practices, which can potentially limit the spread of the disease among vulnerable populations.

The clinic works to provide safe and cost effective COVID-19 screening and assessment services, based on identified needs and in line with policies, procedures, and National Guidelines for Clinical Management and Treatment of COVID-19.

DEFINITIONS

Fever clinic: is a clinic dedicated to assess and treat patients who are suspected COVID-19 cases.

It separates the patients from other areas of hospitals and healthcare centers, reducing potential spread of the virus.

Health Facility: Any facility, owned and managed by natural or corporate body, provides medical services for individuals, including preventive, therapeutic and convalescent care services.

Healthcare Professional: a natural person who is authorized and licensed by the DHA to practice any of the healthcare professions in the Emirate.

Medical Director: is a DHA licensed healthcare professional who holds responsibility and oversight of medical services and clinical operations within a DHA licensed health facility.

Person In-charge: Is a qualified and trained DHA licensed healthcare professional as the person designated site responsible in-charge to be responsible for the safe and secure handling, management accountable, monitoring, tracking, reporting, and operational responsibility of the within the site in the clinic.

Standard Precautions: They are the basic level of infection control precautions to be used during patient management.

Suspected COVID-19: Patient who presents upper or lower respiratory symptoms with or without fever ($\geq 37.5^{\circ}\text{C}$) AND fulfilling any one of the following criteria:

- International travel history during the 14 days prior to symptom onset.
- Been in contact with a confirmed COVID-19 case within 14 days.
- Residing in a community setting where COVID-19 cases have been detected **OR**

- Presence of influenza-like symptoms without history of travel or known possible exposure.

ABBREVIATIONS

COVID	:	Corona Virus Disease
DHA	:	Dubai Health Authority
DM	:	Dubai Municipality
GPs	:	General Practitioners
HCP	:	Healthcare professional
HF	:	Health Facility
HPSD	:	Health Policies and Standards Department
HRS	:	Health Regulation Sector
PHPD	:	Public Health and Prevention department
PPE	:	Personal Protective Equipment
SOPs	:	Standard Operating Procedures.

1. BACKGROUND

Fever Clinics within the community form an important part of Public Health preventative measures to curtail the spread of COVID-19. Fever clinics are especially useful to cover areas of high population density and/or areas where access to healthcare services is limited. Fever Clinics play an important role in relieving the burden on hospitals and resources within the wider health system by providing rapid triage and assessment of symptomatic patients and allowing hospital emergency departments to continue to focus on other clinical services for patients requiring emergency care. In response to the COVID-19 pandemic, many countries have opted to offer fever clinics in a variety of models, for example centres, outlets, mobile units and/or through teleconsultations. As the first point of contact, fever clinics are typically required to adopt a flexible approach to ensure adequate number of patients are seen within a defined timeframe and finite resources. Fever Clinics are physician led services supported by nurses, ancillary or support staff, volunteers to perform patient assessment, temperature checking, treatment for minor symptoms and where necessary testing and referral to an isolation facility or hospital.

There are several precautionary measures to be followed by fever clinics. This includes vaccination and regular testing of staff, use of protective equipment, use of negative pressure rooms where possible, use of HEPA filters, hand washing before and after each patient contact, regular cleaning of services with disinfectant, social distancing of two (2) meters in waiting areas, adopting a booking system to avoid patients waiting for long periods, utilising contactless payment systems, keeping fever clinics away from remaining clinics to prevent the spread of infection and ensuring the patient flow in and out of the clinic (corridors) is one way.

2. SCOPE

- 2.1. Screening and treatment of suspected COVID-19 patients in DHA licensed health facilities.
- 2.2. Triage of suspected COVID-19 patients through the healthcare system.

3. PURPOSE

- 3.1. To provide dedicated clinics for suspected COVID-19 patients.
- 3.2. To reduce the burden on emergency departments in the hospitals.
- 3.3. To reduce the impact on scarce health resources through use of a controlled triage system.
- 3.4. To assure provision of the highest levels of safety and quality in COVID-19 fever clinic services in Dubai Health Authority (DHA) licensed health facilities.
- 3.5. To limit the contact of suspected COVID-19 patients with other patients.
- 3.6. To identify COVID-19 cases in early stage of disease.

4. APPLICABILITY

- 4.1. DHA licensed Healthcare Professionals (HCP) and Health Facilities (HF) providing COVID-19 Fever Clinic services.

5. STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES

- 5.1. All HF providing COVID-19 Fever Clinic services shall adhere to the United Arab Emirates (UAE) Laws and the Emirate of Dubai regulations.

- 5.2. HF aiming to provide COVID-19 Fever Clinic services shall comply with the DHA licensure and administrative procedures available on the DHA website <https://www.dha.gov.ae>.
- 5.3. The HF should develop the following Standard Operating Procedures (SOPs); but not limited to:
- 5.3.1. Patient Identification Policy.
 - 5.3.2. Patient acceptance criteria. (**as mentioned in Standard Four**)
 - 5.3.3. Patient assessment and admission.
 - 5.3.4. Patient education and Informed consent.
 - 5.3.5. Patient health record policy.
 - 5.3.6. HASANA data entry procedure.
 - 5.3.7. COVID-19 sample collection and transfer procedures.
 - 5.3.8. Result reporting policy.
 - 5.3.9. Infection control measures and hazardous waste management procedures.
 - 5.3.10. Incident reporting policy.
 - 5.3.11. Patient privacy policy.
 - 5.3.12. Personal Protective Equipment (PPE) management policy.
 - 5.3.13. Quality and Patient Safety Plan.
 - 5.3.14. Medication management.
 - 5.3.15. Emergency action plan.
 - 5.3.16. Patient discharge/transfer.

- 5.4. The HF shall maintain documented evidence of the following:
 - 5.4.1. Transfer of critical/complicated cases when required.
 - 5.4.2. Patient discharge.
 - 5.4.3. Clinical laboratory services.
 - 5.4.4. Equipment maintenance services.
 - 5.4.5. Laundry services.
 - 5.4.6. Medical waste management as per Dubai Municipality (DM) requirements.
 - 5.4.7. Surveillance of all protected exposed and non-protected exposed staff.
- 5.5. The HF should maintain a charter of patients' rights and responsibilities posted at the entrance of the premise in two languages (Arabic and English).

6. STANDARD TWO: HEALTH FACILITY REQUIREMENTS

- 6.1. The HF should meet the health facility requirement as per the [DHA Health Facility Guidelines \(HFG\)](#).
- 6.2. Fever clinics should have a direct external access not requiring patients to travel through a hospital, healthcare facility or a community area.
 - 6.2.1. Careful consideration should be given to ensure patients presenting to the facility do not have contact with other vulnerable patients.
- 6.3. The HF should have an accessible website that offers instructions to patients prior to and post visiting the facility.
- 6.4. The HF should have a hotline line number that offers 24/7 support services to suspected patients.

- 6.5. The HF should screen patients for fever and COVID-19 like symptoms before entering the facility.
- 6.6. The HF should keep up to date on the recommendations for preventing spread of COVID-19.
- 6.7. The HF should ensure reporting all suspected cases on HASANA platform within 8hrs of patient encounter.
- 6.8. The HF should install and operate equipment required for provision of the proposed services in accordance to the manufacturer's specifications.
- 6.9. The HF should ensure easy access and mobility within the treatment areas for all patient groups.
- 6.10. The HF design shall provide assurance of patients and staff safety.
- 6.11. The HF shall have appropriate equipment and trained HCP to manage critical and emergency cases.
- 6.12. The HF shall ensure it has in place adequate lighting and utilities, including temperature controls, water taps, medical gases, sinks and drains, lighting, electrical outlets and communications.
- 6.13. The facility should ensure following the testing requirements listed in the DHA SARS-CoV-2 Testing Standards.
- 6.14. The facility should ensure the availability of appropriate staff to deliver the required patient care and management services safely.
- 6.15. HF should maintain availability of Person In-charge for each working shift in the clinic.

7. STANDARD THREE: HEALTHCARE PROFESSIONALS REQUIREMENTS

- 7.1. Only DHA licensed HCP are permitted to provide services at the facility.
- 7.2. HF should ensure that all HCP and personnel completed their COVID-19 Vaccination.
- 7.3. The Privileging Committee and/or Medical Director of the health facility shall privilege the physician aligned with his/her education, training, experience and competencies. The privilege shall be reviewed and revised on regular intervals. The privileged physician shall comply with the following:
 - 7.3.1. Following UAE and Dubai federal laws and regulations.
 - 7.3.2. Management of the patients as per the most recent guidelines published by NCEMA and Dubai COVID-19 Command and Control Center (C3)
 - 7.3.3. HCP should be well trained and/or experienced with the management of suspected COVID-19 cases.
 - 7.3.4. HCP should be trained on safe donning and doffing of PPEs.
 - 7.3.5. Healthcare workers should be dedicated to fever clinics to minimise risk of transmission and exposure to other patients and healthcare workers.
 - 7.3.5.1. Staff should not alternate between the fever clinic and other clinical areas where vulnerable patients are managed.

8. STANDARD FOUR: FEVER CLINIC PATIENT SELECTION AND ASSESSMENT

- 8.1. Fever clinic services shall be provided to the patients as per the case definition of the national guidelines for management and treatment of COVID-19 and for screening patients presenting with symptoms of:

- 8.1.1. Fever or chills
- 8.1.2. Cough
- 8.1.3. Myalgia or muscle aches
- 8.1.4. Fatigue
- 8.1.5. Shortness of breath
- 8.1.6. Chest pain
- 8.1.7. Sore throat
- 8.1.8. Runny nose or congestion
- 8.1.9. Diarrhoea and nausea
- 8.1.10. Headache
- 8.1.11. Pneumonia and ARDS
- 8.1.12. Loss of sense of smell and/or taste
- 8.1.13. Renal failure, pericarditis and Disseminated Intravascular Coagulation

8.2. The fever clinic should have a set of minimum required baseline lab work up for the presenting patients as follows:

- 8.2.1. Complete blood count
- 8.2.2. Renal function and Electrolytes
- 8.2.3. Random Glucose
- 8.2.4. Liver function test including ALT/AST
- 8.2.5. ECG
- 8.2.6. CRP

8.2.7. Chest X ray

9. STANDARD FIVE: INFECTION CONTROL MEASURES

- 9.1. HF should ensure patient protection and infection control measures are implemented at all times to bring the risk of COVID-19 infection to the least minimum.
- 9.2. Standard precautions, particularly good hand hygiene practice, attention to appropriate environmental cleaning, and disinfection, should be strictly implemented by all staff working in the fever clinic.
- 9.3. HF should implement cleaning and disinfection of environmental services in the context of COVID-19.
- 9.4. All staff working in a fever clinic must have completed training on safe fitting and removal of PPE.
- 9.5. The facility should ensure appropriate donning and doffing areas for the staff as deemed necessary to ensure staff and patient safety.
- 9.6. Adequate infection control supplies are provided, including biohazard containers and supplies for hand hygiene.
- 9.7. HF should follow several precautions, including but not limited to:
 - 9.7.1. Universal masking policy for all healthcare workers and patients.
 - 9.7.2. Activate daily monitoring for all facility staff before starting their work and it should be documented, including but limited to:
 - a. Measuring temperature
 - b. Reporting symptoms

- c. History of contact with COVID-19 patient.
- 9.7.3. Promote adherence to respiratory hygiene, cough etiquette and hand hygiene among everyone in the facility.
- 9.7.4. Maintain physical distance between patients at the waiting area.
- 9.7.5. Utilize electronic communications as much as possible.
- 9.8. The HF shall have in place dedicated zones as detailed below:
- 9.8.1. Green Zone: Outside the facility where the security personnel and liaison officers from the relevant authorities are present to provide general services to the patients. No Personal Protective Equipment (PPE) are required in the green zone. Protective mask must be worn.
- 9.8.2. Yellow Zone: The reception area, stairs, elevators, corridors between rooms, service rooms (laundry and kitchens), and staff work locations where they operate to provide daily general services for patients. Only protective mask and gloves are required in the yellow zone.
- 9.8.3. Orange Zone: Registration/Triage area, waiting areas and sample collection area for suspected COVID-19 patients - asymptomatic to mildly symptomatic. While being there staff should have on a protective mask, gloves, protective gown, and eye shield.
- 9.8.4. Red Zone: This is the treatment rooms for confirmed and highly suspected COVID-19 patients -with moderate to severe symptoms. While being there, a protective mask, gloves, protective gown, and eye shield should be worn. Doffing

of PPE should be arranged next to this zone. A maximum of one patient is allowed per room, exception to be given to members of the same family, especially if they have elderly or children, subject the room can accommodate the family members.

9.9. The HF should ensure that assigned staff and patients in each zone do not interact with each other.

9.10. The HF should ensure appropriate patient journey through the facility is established minimizing encounters with staff and other patients.

10. STANDARD SIX: HASANA REPORTING

10.1. The HF should register and be granted a HASANA account through DHA licensing department.

10.2. The HF should assign dedicated staff for data entry on HASANA.

10.3. The HF should ensure all suspected cases are reported through HASANA platform within eight (8) hours of patient encounter.

10.4. The HF should ensure that the data entered is accurate and meets DHA requirements.

10.5. The HF should ensure lab tests and results are entered on the platform within (2) hours of request and receipt of the lab result.

11. STANDARD SEVEN: PATIENT TRANSFER AND FOLLOW UP

11.1. The HF should ensure safe patient transfer to a facility capable of handling his/her condition.

- 11.1.1. Following the case definition of the most recent National Guideline for Management and Treatment of COVID-19.
- 11.2. Referral and transfer of the patients shall be done through the Bed Management Team in the COVID-19 Command and Control Centre.
- 11.3. The facility should ensure adhering to the outlined in the [Patient Referral and Inter-Facility Transfer Policy](#).
- 11.4. The HF should ensure reporting of test result to patients through SMS or phone call as outlined in SARS-CoV-2 Testing Standards.
- 11.5. The transferring facility shall follow up the cases and document the status within 24 hrs of the patient transfer.

12. STANDARD EIGHT: WASTE MANAGEMENT AND DISPOSAL

- 12.1. HFs should follow the internal facility SOPs and regulatory requirements about appropriate disposal requirements for medical waste.
- 12.2. Facilities should have a designated area for disposal, managing and monitoring of waste materials generated from the facility.
- 12.3. Facilities should dispose pharmaceuticals wastes which contain pharmaceutically-active agent (including expired drugs, partially administered medications, discarded items used in the handling of pharmaceuticals), as per the DHA Medications disposal and waste management policy.
- 12.4. Facilities should dispose of the biohazard containers according to facility and regulatory requirements.

12.5. Needles must be discarded in biohazard containers that are closable, puncture-resistant, leak-proof on sides and bottom, labelled, and color-coded (e.g., sharps container). Then dispose of the biohazard containers according to facility and regulatory requirements.

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