

Veterans Health Administration
Moving Forward Guidebook:
Safe Care is Our Mission



VA

U.S. Department
of Veterans Affairs

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Document History Log

The Moving Forward Guidebook is a living document that will be updated to reflect new guidance and information. Below is the Document History Log of changes.

Document Type (Baseline/Revision)	Document Revision	Effective Date	Description
Baseline	v1.0	6/9/2020	First draft release of the Moving Forward Guidebook

Veterans Health Administration (VHA) Moving Forward Guidebook

To supplement the [Moving Forward Plan](#), this document is a tactical guidebook to provide Veterans Integrated Service Networks (VISNs) and Veterans Health Administration (VHA) facilities a centralized document for regulations, policy, and guidance associated with expanding services at VA sites of care. Links to all source documents referenced in this document will be provided, and this document will be updated to reflect current guidance. Requests for additional information for inclusion should be directed to the Coronavirus Disease-19 ([COVID-19 Resource Room](#)). Changes from the previous version will be included in the change log and outlined here in future iterations.

Moving Forward Preparation

VA guidance, and federal, state, and local guidance (e.g., Centers for Disease Control (CDC) guidance) is in alignment with the [White House Guidelines for Opening Up America Again](#). State and Regional Gating Criteria, described in the *White House Guidelines*, should be used to determine readiness of facilities to safely expand services to Veterans. A summary of key guidance is provided below.

Moving Forward Guidance Snapshot	
<p>Communications Materials VA has developed a national communications campaign in conjunction with the Moving Forward Plan, Moving Forward Together: Safe Care is Our Mission.</p>	<p>Moving Forward Plan Implementation Checklist A customizable checklist, developed by VISN 12, is available to facilitate planning and preparation.</p>
<p>Entry Point Screening</p> <ul style="list-style-type: none"> • Updated Guidance on Screening Procedures and Facility Access for Department of VA Health Care Systems • COVID-19 Non-Clinical Screening for Entry into Health Care Facility • CDC Guidance: Interim Infection Prevention and Control Recommendations <p>Appropriate Protective Attire</p> <ul style="list-style-type: none"> • Moving Forward PPE Ambulatory Care Settings • COVID-19 Requirements for providing PPE for selected home health care services MFH, Caregiver Support Program, and Spinal Cord Injury • Update: COVID-19 Mask Use in VHA Facilities • Employee Safety Communications • VHA Clinical Strong Practices: Types of Respirators and Masks Available in the Health Care Setting for COVID-19 • CDC Guidance: Use of Cloth Face Coverings <p>Testing</p> <ul style="list-style-type: none"> • Guidance on Testing for Veterans and Employees • VHA CLC and SCI/D Veteran and Staff <p>Training</p> <ul style="list-style-type: none"> • VA Talent Management System • VA COVID-19 Training Site 	<p>Physical Environment</p> <ul style="list-style-type: none"> • HEFP Clinic Re-Opening Guidelines • VHA Bed Expansion-Space Toolkit • Coronavirus Patient Room Cleaning Guidance Update <ul style="list-style-type: none"> ○ VHA COVID-19 Cleaning Guidelines ○ Environmental Management Service Standard Operating Procedure Patient Room Cleaning (Terminal / Discharge Isolation) • Medical Center and Community-Based Outpatient Clinic Cleaning Matrix <p>Service Expansion</p> <ul style="list-style-type: none"> • Moving Forward Guidance for Resumption of Procedures for Non-Urgent and Elective Indications • Prioritization for Consultations, Procedures, and Appointments • Office of Veterans Access to Care (OVAC) Consult Toolbox <p>Monitoring</p> <ul style="list-style-type: none"> • VA National Surveillance Tools • VHA Moving Forward Data Resource Guide <p>Innovative Ways Forward</p> <ul style="list-style-type: none"> • VHA Telehealth Services site • RCI Implementation Guidebook • VA Diffusion Marketplace • VA Clinical Strong Practices

Employee, Veterans and Visitors Safety

Maintaining an environment of safety for employees, Veterans and visitors includes multiple layers of protection including screening for persons with symptoms at entry points, source control via face coverings for all individuals entering a facility, maintaining appropriate physical distance, limiting the number of people in the facility, hand hygiene, environmental disinfection, and pre-screening patients prior to visits or procedures.

Entry Point Screening

Access to VHA facilities should continue to be limited and appropriate signage should be in place to direct anyone entering the facility to the appropriate access point. All visitors to VHA facilities including Veteran patients and employees, should continue to be screened for COVID-19 when entering the facility, which includes being screened for fever.

- [Updated Guidance on Screening Procedures and Facility Access for Department of VA Health Care Systems](#)
- [COVID-19 Non-Clinical Screening for Entry into Health Care Facility](#)
- [CDC Guidance: Interim Infection Prevention and Control Recommendations](#)

Appropriate Protective Attire

Source control for a VA health care facility involves the use of a face covering on all individuals entering a facility, whether employees, patients, or visitors. Face coverings are normally cloth and are not considered Personal Protective Equipment (PPE). The face covering must cover the mouth and nose, fit snugly, allow for breathing without restriction, and be laundered daily. Individuals should be informed to be careful when removing their face covering and not to touch their eyes, nose, and mouth when removing their face covering. Individuals should wash their hands immediately after removing their face covering. In addition, source control face coverings are to be provided to inpatients who move outside of their room.

At VA we are following the CDC guidance as well as the advice of experts across the world. Experts agree that not everyone in a hospital needs an N95 mask. If a Veteran wears an oxygen mask, they don't need to wear a cloth face covering. The facility may ask Veterans to wait in a designated space until their appointment time.

VHA staff that require additional respiratory protection to provide direct patient care (enter a room, interact within 6 feet) and/or evaluate any suspected or confirmed COVID-19 infected patients will receive appropriate PPE including surgical masks and/or N95 respirators or Powered Air Purifying Respirators (PAPRs). All other staff, trainees, volunteers, Veterans, inpatient residents, and visitors are required to wear a face covering during their time at the VA health care facility to ensure everyone's safety. The appropriate respiratory protection PPE will be provided to staff conducting home visits to Veterans. Employee refusal to wear a face covering should be referred to the Reasonable Accommodation (RA) Coordinator if there is a medical reason for the refusal or Human Resources if there is not.

- [Moving Forward PPE Ambulatory Settings](#)
- [COVID-19 Requirements for providing PPE for selected home health care services MFH, Caregiver Support Program, and Spinal Cord Injury](#)
- [Update: COVID-19 Mask Use in VHA Facilities](#)
- [Employee Safety Communications](#)
- [VHA Clinical Strong Practices: Types of Respirators and Masks Available in the Health Care Setting for COVID-19](#)

- [CDC Guidance: Use of Cloth Face Coverings](#)

Testing

VHA can provide testing to Veterans and employees who are asymptomatic and request testing. Testing under this scenario should not be performed by a rapid test method, reserving those supplies for Veterans and staff who have symptoms of COVID-19 (screen positive), Veterans admitted to the hospital and/or Veterans who are scheduled for surgery or certain high-risk procedures. Veterans and staff should be informed that test results may take several days.

All VHA facilities should implement population-based baseline testing of all Veterans and employees working in Community Living Centers (CLC) and Spinal Cord Injury and Disorder (SCI/D) units. In addition, VHA CLCs may receive patients under a Fourth Mission assignment from a State Veteran Home or community nursing home. Any patients proposed for admission to a CLC or SCI/D unit should be tested for COVID-19. VA health care Facility Directors, in conjunction with Network Directors, should develop a plan for ongoing COVID-19 disease screening, monitoring, and testing for Veterans/residents and employees in CLCs and SCI/D units.

- [Guidance on Testing for Veterans and Employees](#)
- [VHA CLC and SCI/D Veteran and Staff](#)

Training

To support ongoing COVID-19 care, VA is leveraging clinical crisis skills training for clinical staff re-assigned to the intensive care unit, wards, emergency department, community living center, and other settings. Existing materials from VA, professional societies, and other external sources are validated by clinical leads and national VA experts to be used within VA and in the community. This same interprofessional clinical group identifies gaps in training and reviews new products developed by VA education teams to provide the highest quality education and training. "COVID in 20" interviews VHA clinical experts and discusses multi-disciplinary COVID topics in a 20-minute video podcast. These materials and other resources for virtual training are available on the COVID-19 Training Site, a public-facing site with no network access requirements. All of these teams and processes are linked as well to the Integrated Clinical Communities (ICCs) to weave together clinical care, policy, and training.

- [VA Talent Management System](#)
- [VA COVID-19 Training Site](#)

Physical Environment

Remodeling the environment of care as needs arise within the VHA care delivery model is a priority for expanding care to Veterans. VHA Healthcare Environment and Facilities Programs (HEFP) are establishing guidance and support for environmental program areas such as occupational safety and health, fire protection, Green Environmental Management System, textile care processing, pest control, housekeeping/sanitation, waste management, interior design, and engineering. HEFP will publish and communicate best practices related to facility design, operation, and management as needed or required.

- [HEFP Clinic Re-Opening Guidelines](#)
- [VHA Bed Expansion-Space Toolkit](#)
- [Coronavirus Patient Room Cleaning Guidance Update](#)
 - [VHA COVID-19 Cleaning Guidelines](#)
 - [Environmental Management Service Standard Operating Procedure Patient Room Cleaning \(Terminal / Discharge Isolation\)](#)

- [Medical Center and Community-Based Outpatient Clinic Cleaning Matrix](#)

Service Expansion

Once the physical space and employees are prepared to safely provide expanded face-to-face care, the following operational guidance will assist facilities with identifying and preparing to expand services.

- [Moving Forward Guidance for Resumption of Procedures for Non-Urgent and Elective Indications](#)
- [Prioritization for Consultations, Procedures, and Appointments](#)
- [Office of Veterans Access to Care \(OVAC\) Consult Toolbox](#)

Monitoring

The [VA National Surveillance Tools](#) (VA-NSTs) are a single, authoritative VA data source for case status of VA patients with respect to outbreaks. Using the VA-NST, John Hopkins COVID-19 Dashboard, and other sources ([VHA Moving Forward Data Resource Guide](#)), the following data sets will be used to indicate safe progress during service expansion:

- COVID-19 Case Growth
- Clinic Capacity
- Bed Capacity
- Equipment and Supplies
- Workforce
- Testing
- Outpatient Operational Metrics

Innovative Ways Forward

VHA facilities are encouraged to continue any new operations implemented during the COVID-19 pandemic, which have resulted in better performance, improved outcomes and higher Veteran satisfaction. VHA plans to learn from best practices implemented during the COVID-19 pandemic for consideration as future enterprise standard processes move towards a “new normal”.

Virtual Care

VA will prioritize virtual modalities for delivery of primary care, mental health, and specialty care services. Optimize and prioritize virtual modalities to support appointments before and after the delivery for procedures (i.e. colonoscopy) and surgery when clinically appropriate:

- Pre-op and post-op appointments
- Any post discharge appointments as clinically appropriate
- Follow-up appointments in mental health and primary care (telephone or video to home)

Additional information on telehealth and virtual care can be found on the [VHA Telehealth Services site](#).

Care Coordination & Referral Coordination Teams

VHA facilities will recommence their Referral Coordination Initiatives (RCI) in lockstep with the Moving Forward Plans. The goal of RCI is to inform Veterans about their full range of options for safe care at all times, highlighting the benefits of remaining within the VA health care system as they decide whether to receive Specialty Care within VA or in the community. For those Veterans referred to community care, VA will continue to offer a choice of providers who can meet their health care needs. For those Veterans who request that VA arrange their community care appointments, VA will work to streamline communication and handoffs with community care staff members. VA will be the integrator

and coordinator of care while addressing Veteran concerns about having more control in the scheduling process.

Additional information on Referral Coordination Initiative (RCI) can be found in the [RCI Implementation Guidebook](#). RCI questions can be directed to the VHARCI@va.gov.

Moving Forward Promising Practices

Visit [VA Diffusion Marketplace](#) and [VA Clinical Strong Practices](#) to learn about important and life-saving promising practices throughout the VA Healthcare System. As VISNs and VA facilities begin to expand services, VISN and facility leadership are encouraged to share their local strategies and approaches to highlight and share promising practices with other VISNs and facilities.

If you know of an innovative or promising practice that can help VHA Moving Forward, please email VHAClinicalStrongPractices@va.gov.

VISN/VAMC	Example Promising Practice	Details
V20 Puget Sound	Tele-Urgent Care	On-demand Tele-Urgent Care or scheduled Primary Care to reduce Emergency Department (ED) Traffic
V16 New Orleans	Protocol for Safe Rapid Sequence Induction (RSI)	Practical guidance for health care professionals on how to safely perform an RSI for patients with COVID-19.
V8 Tampa	Video Blood Pressure Visits	Blood pressure monitoring using virtual modalities
V12 Madison	Chronic Obstructive Pulmonary Disease Coordinated Access To Reduce Exacerbations (COPD CARE)	High-quality post-discharge COPD care to our Veterans.
V12 Madison	Environmental Management Services Training Specialist	Improving infection control with consistent training of health care facility housekeepers
V2 Syracuse	Curbside Services	Immunizations, blood draws, medication delivery, testing
V2 Syracuse	High-Touch Teams	Team designated to clean all high-touch surfaces
V5 Huntington	Security Officer of the Day	Ensure operations for that day are going according to plan; visit screening and waiting areas to ensure policies and requirements are being met