

SEEING PATIENTS IN YOUR OFFICE: FOUR ISSUES

The top four issues to address when seeing patients in-person are:

1. Masks
2. Vaccinations
3. Consent to be seen
4. Ventilation

NOTE: These are very fluid issues; the requirements, particularly related to masks and vaccines, are frequently changing.

ISSUE #1: MASKS IN THE OFFICE

- Unvaccinated providers, staff, and patients in the office need to be masked.
- Masks for vaccinated providers and staff
 - States may require or recommend that all healthcare workers, including all staff in physician offices, be masked.
 - » For example, [Massachusetts requires](#) masks for both vaccinated and unvaccinated individuals at all times in health care facilities, specifically including physician offices. The mask requirement applies to patients, staff, vendors, and visitors.
 - » Other states, such as Virginia, recommend masks wearing by staff in healthcare facilities, pursuant to CDC guidelines. Note that private businesses may be able to impose greater requirements, such as requiring masks for all.
 - » Masks for vaccinated patients
 - Some states, such as Oregon, are requiring all people to wear masks indoors, regardless of vaccine status.
- Risk Management thoughts:
 - Given the CDC's guidelines for everyone to be masked in health care facilities, those not following the guidelines, if not required to by the state, may have to explain to patients why they are deviating from CDC guidelines.
 - Some psychiatrists have found clear plastic face shields useful when seeing therapy patients in person.
- Resources:
 - The Littler law firm is tracking state masking orders, which can be accessed [here](#)
 - State medical associations may have state-specific resources
 - The local health department

ISSUE #2: COVID VACCINATIONS

- Vaccinations for providers and staff
 - States can require all who work in healthcare to be vaccinated. For example, California requires all who work in healthcare, including doctors' offices (specifically including behavioral health) to be vaccinated.
 - Other states vary in the exact healthcare facilities that requirement applies to, such as only applying to hospitals and long-term care facilities.
 - Given the recent full approval of a COVID vaccine, more of these vaccine requirements may be enacted.
- Resources:
 - » The Littler law firm is monitoring the states and their findings can be accessed [here](#).
 - » State medical associations

- Vaccinations for patients
 - Given the COVID Delta variant surge, and the possibility of breakthrough infections, psychiatrists can choose to see only patients who are vaccinated in their office if:
 - » The reason for the policy is based on the obligation to keep everyone safe, including staff and patients,
 - » And the offer is made to continue treatment via telepsychiatry.

For more information, see this [commentary by Jacob Appel, MD, JD](#).

ISSUE #3: CONSENT TO BE SEEN IN-PERSON

Consider having patients sign a consent form to be seen in the office. Such a document can spell out patient responsibilities (such as not coming into the office with a fever or other symptoms), what the psychiatrist is doing to minimize risk, and a statement that the patient is assuming the risk by choosing to be seen in person.

Resource: Contact your professional liability insurance company for a template.

ISSUE #4: OFFICE VENTILATION

In addition to physical distancing, wearing masks, hand hygiene, and vaccination, ventilation improvements can be useful in mitigating the risk of COVID transmission.

Resources, including no-cost improvements, include:

- [From the CDC](#)
- [From OSHA](#)

TO DO:

- Determine state requirements for masks and vaccines
- Develop office policies and procedures
- Communicate policies to staff
- Communicate policies to patients
- Re-evaluate as requirements and recommendations change

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