

TA 539-0520

MTF Audiology Service Best Practices for each Health Protection Condition During the COVID-19 Response

Department of Defense Instruction (DoDI) 6200.03 (Public Health Emergency Management (PHEM) Within the DOD, dated 28 March 2019), defines Health Protection Conditions (HPCONs) providing a framework to approach disease outbreaks, given the severity of disease and level of disease transmission in a local community. The military treatment facility (MTF) Audiology Service Best Practices are guidelines to follow at each HPCON level to provide uniformity and consistency for MTF Audiology Service operations across the enterprise.

The MTF Audiology Services Best Practices outline specific actions MTF Audiology Services can take in response to a health threat. Regardless of the current HPCON level, always follow Commander guidance, as well as guidance from the local MTF, installation, and local public health agencies. The MTF Audiology Services Best Practices are offered as a guide to treat patients while protecting the health and safety of health care providers, Families, and communities.

More detailed information on HPCONs and how they are determined is available on page 7.

Contact the Army Hearing Program:

Call: 410-436-3797

Visit: <https://phc.amedd.army.mil/organization/cphe/Pages/HearingDivision.aspx>

Email: usarmy.apg.medcom-aphc.mbx.army-hearing-program@mail.mil



For current COVID-19 information:

<https://phc.amedd.army.mil/covid19>
<https://www.coronavirus.gov/>

The Military Health System Nurse Advice Line is available 24/7:

Call 1-800-874-2273 option #1
or visit <https://www.health.mil/1-Am-A/Media/Media-Center/NAL-Day-at-a-glance>

For more information, contact your installation's Department of Public Health.



Public Health
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Army Public Health

The Army COVID-19 Information Hotline:

1-800-984-8523
Overseas DSN 312-421-3700
Stateside DSN 421-3700

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ROUTINE

No community transmission

No health risks are present, other than diseases endemic to the local area.

Follow MTF Audiology Service Best Practice Guidelines (BPG):

- Offer all MTF Audiology Service screening and diagnostic testing.
- Ensure a sufficient supply of personal protective equipment (PPE), hand sanitizers, disinfecting wipes, and tissues, as well as clear communication face masks.
- Wash (at least 20 seconds with soap and water) or sanitize hands before and after each patient. Avoid touching eyes, nose, and mouth.
- Ensure staff receives routine and COVID-19 infection control training.
- Ensure all provider immunizations are up to date, including seasonal flu shot.
- Stay home if sick, and avoid close contact with family members and pets.
- Follow established local infection control and staff health status standard operating procedures (SOPs).
- Dispose of medical waste, including poorly fit earplugs, in accordance with local SOPs.
- Plan for operations during all HPCONs (supplies, schedule, clinic hours, staff, physical set up, etc.) to accommodate social distancing requirements and appointment demands.

ALPHA LIMITED

Community transmission beginning

There is awareness of a novel disease of possible concern, disease has the potential to move rapidly into and through the local area, and/or community transmission is beginning, but remains focal and sporadic.

Continue all previous MTF Audiology Service BPG and:

- Offer all MTF Audiology Service screening and diagnostic testing with enforcement of guidance below.
- Prepare to modify clinic hours to accommodate current demand or future surge during transition from HPCON 0 to Alpha, or Bravo to Alpha, while following social distancing guidelines.
- Enforce recommended social distancing guidelines for patient flow, waiting rooms, hallways, and inside multi-station booths for patients and providers. Post signs to remind patients of social distancing guidelines.
- Enforce a no cell phone and/or electronics use policy inside facilities for patients. Electronic devices may be used for completing web-based intake forms.
- Expand teleaudiology as much as possible (e.g., hearing aid fittings, tinnitus referrals and classes, patient histories, patient training and education).
- Ensure patients wash or sanitize hands before and after the clinical encounter, including before and after appointment check-in.
- Ensure maximum ventilation and patient dividers (as needed).
- Follow local infection control SOPs, Centers for Disease Control and Prevention (CDC) guidelines, and manufacturer instructions for use for disinfecting hand switches (if not using disposable sandwich bags as covers), cords, headphones (if not using disposable earcup covers), chairs, physical barriers, door handles, tablets, toys, surfaces, intake instruments and supplies, using products effective against COVID-19, after each patient use.
- Continue in-person training and education opportunities (e.g., hearing aid orientation, Progressive Tinnitus Management classes) while adhering to social distancing guidelines. Attendance is predicated upon space availability and the ability to adhere to social distancing guidelines.
- Develop patient information for appointment delays when moving from HPCON A to HPCON B and/or resumption scheduling when moving from HPCON B to HPCON A.
- Avoid unnecessary contact with patients, such as shaking hands and hugging.

BRAVO MODERATE

Increased Community transmission

An enhanced threat is defined by increased community transmission, to include increased risk of exposure or imminent spread of disease in the local area.

Continue all previous MTF Audiology Service BPG and:

- Reduce non-urgent ambulatory and inpatient Audiology Service appointments (e.g., hearing aid evaluations, earmolds, pediatric evaluations) in accordance with local MTF public health guidelines, unless required for readiness.
- Offer readiness hearing and vestibular evaluations for Service members and essential appointments (e.g., sudden hearing loss, temporal bone fractures) or acute/urgent services (e.g., cochlear implant, facial stimulation, ototoxic monitoring) for all beneficiaries.
- Defer high risk procedures that increase risk of infection via coughing or emesis (e.g., earmold impressions, cerumen management, vestibular evaluations) unless required for readiness. Ensure providers and patients wear masks. Implement vestibular screening to identify acute vestibular dysfunction.
- Continue Universal Newborn Hearing Screening (UNHS) when conducted by newborn medical staff. Limit UNHS if conducted by Audiology Service staff to high risk patients and those whose parents will have a Permanent Change of Station before service resumes at HPCON Alpha. Distribute rescheduling information with discharge paperwork. Telephonically follow-up 1 week after discharge and maintain a “missed UNHS COVID-19” log to reschedule screenings or follow-up appointments.
- Restrict/limit use of insert earphones and use supraaural earphones.
- Ensure all patients report to MTF/Service triage before reporting to Audiology Service appointments.
- Ensure providers wear approved PPE. Ensure patients wear approved face coverings and maintain proper earcup seals.
- Ensure providers wear eye protection or face shields when conducting high risk aerosol generating procedures.
- Wear scrubs or a separate uniform, and change clothes at work (launder separately).
- Maximize teleaudiology (e.g., Progressive Tinnitus Management, remote hearing aid evaluations, hearing aid orientations and follow-ups, patient education and training classes).
- Prepare to modify service hours to accommodate future demands during transition from HPCON Bravo to Charlie, or Bravo to Alpha, in accordance with social distancing guidelines.
- Communicate appointment delays and scheduling resumption information to patients.

CHARLIE SUBSTANTIAL

Sustained Community transmission

This high threat is due to sustained community transmission of a high-morbidity disease and continued disease spread in the local area.

Continue all previous MTF Audiology Service BPG and:

- Significantly reduce MTF Audiology Service appointments unless required for imminent deployment, medical management, or surgical support.
- Prepare to adjust work practices such as teleworking or modifying clinic hours to accommodate demand for required, acute, or urgent appointments.
- Consider creative socially distant patient care activities (e.g., mail-in or drive-through hearing aid repair, remote hearing aid follow-up adjustments, group hearing aid orientation, follow-up appointments, conduct patient histories telephonically).
- Maximize teleaudiology (e.g., Progressive Tinnitus Management, remote hearing aid evaluations) and distance learning for patient education and training (e.g., Hearing Program Officer and Hearing Technician Courses, unit hearing health education).
- Prepare to modify services and/or clinic hours to accommodate demand or future surge during transition from HPCON Charlie to Bravo to permit social distancing as local conditions allow.

DELTA

SEVERE

Widespread Community transmission

This very high threat is characterized by wide-spread community transmission of a high-mortality disease and continued disease spread in the local area.

Continue all previous MTF Audiology Service BPG and:

- Continue suspension outlined in HPCON Charlie.
- Expect to telework for extended periods of time as movement in the community may be restricted and patients may be directed to stay at home.
- Follow all directives and guidance from the Command, local, state and Federal authorities; public health actions are intended to protect the health and safety of Service members, Family members, and patients.

Additional Information on HPCONs

HPCON changes typically occur at the local level in response to prompts that may impact a defined locality such as an installation, surrounding community, or region. However, the DOD and Military Departments are also inter-connected functional communities based on shared mission requirements. Changes to the HPCON may be directed by the Secretary of Defense or the Secretaries of the Military Departments to be applicable DOD- or Military Department-wide.

Installation and MTF Commanders or Directors employ the HPCON framework to identify appropriate responses to a public health emergency or incident of public health concern based on the scope and severity of the situation. Providing suggested actions for standardized (yet scalable and flexible) actions within HPCON designations ensures a measured response.

HPCONs may be synchronized with the installation Force Protection Condition (FPCON). This synchronization may address installation access, appropriate Force Health Protection (FHP) measures, and limitation of non-critical activities. The HPCON is to be coordinated with the surrounding local communities to ensure consistent messaging and unity of effort.

Any determination to elevate or lower the HPCON will be made by the Installation Commander in consultation with the Public Health Emergency Officer (PHEO), MTF Commander or Director, unless authority has been withdrawn to a higher level.

This framework may be updated during the response to the COVID-19 public health emergency, to include considerations for lowering the current HPCON

designation, as new information or guidance becomes available. Actions may be discontinued at the termination of the public health emergency, unless renewed by the Installation Commander for a specified period of time.

Please refer to the Memorandum, Office of the Under Secretary of Defense for Personnel and Readiness, dated 25 February 2020, Subject: Force Health Protection Guidance (Supplement 2) Department of Defense Guidance for Military Installation Commanders' Risk Based Measured Responses to the Novel Coronavirus Outbreak, for additional information.