March 31, 2020

Dear Opioid Treatment Providers:

With concerns regarding Coronavirus 2019 (COVID-19), the Texas Health and Human Services Commission (HHSC) instructs each opioid treatment program (OTP) to review, update, and implement emergency response plans. Below are some strategies for consideration.

**COVID-19 PREVENTION AND EDUCATION**

Review and implement basic hand washing hygiene strategies with staff and patients. Routinely wipe down and disinfect all work areas, medication dispensing area(s), and equipment and provide infection control and prevention postings throughout the clinic.

Stay up to date on the latest COVID-19 information by visiting the following web pages:

- Coronavirus Disease 2019 (COVID-19) provided on the Texas Department of State Health Services (DSHS) website at [dshs.texas.gov/coronavirus/](http://dshs.texas.gov/coronavirus/).

**EMERGENCY PREPAREDNESS**

When developing emergency response procedures, identify the minimum guest dosing paper work, staff roles, and required signatures to facilitate a smooth transition. Consider medication stock, labels, take home bottles, and staff resources required to implement the emergency response plan. Also consider possible staff shortages that may occur as well as how the clinic will dose patients.

Be prepared to implement emergency procedures for a minimum of two-week intervals.
Review the Drug Enforcement Administration (DEA) list to confirm who is approved to handle medication for transport and ensure treatment staff understand medication transfer procedures to transfer medication stock to and from other clinics.

Prepare for periodic patient surges by communicating with surrounding clinics regarding the clinic’s emergency response plans and discuss how you can help one another.

**TRAIN STAFF**

Ensure all staff are aware of their role in each phase of the emergency response plan and ensure multiple staff have access to the Statewide Opioid Treatment Authority’s cell number and email for emergencies (listed below).

Ensure thorough discussion of the emergency response plan with patients prior to implementation. This discussion will help alleviate concerns related to medication access. Clinics should also share stress management tips with patients and staff in preparation for emergency situations.

Each provider must develop an ongoing communication plan and provide patients with private phone numbers of applicable clinic personnel. The communication plan needs to include links to website information, social media pages, and recorded messages to communicate important information.

**DOsing**

Review with staff how to verify doses and patient identity. Pre-identify patients who are cleared by a physician to safely manage take home medications and consider staggering dosing times to enhance social distancing.

Identify immunosuppressed, pregnant, and otherwise medically vulnerable patients when considering take home medications. Clinics should also consider patients that serve as health care and emergency personnel who may be needed in the field.

Clinics must also develop a plan to address continued dosing of at-risk patients who cannot safely manage their medications in the event a patient has been exposed and/or tested positive for COVID-19.
Emergency dosing plans must include how the clinic will dose quarantined patients as well as patients who do not have the means to pay, due to loss of work, illness, business closures, and/or have no sick/vacation pay or benefits.

HHSC recommends clinics ensure patients understand the need to retain all take home medication bottles. Retained medication bottles may help another clinic assist in the dosing of the patient, should clinic displacement occur.

Blanket Exceptions should not be entered into the SAMSHA Intranet and should instead be included in the Emergency Response Plan clinics submit to the SOTA.

**NOTICE: Referring patients to a hospital to receive dosing is not an acceptable dosing plan should a clinic close.**

**HHSC Communication**

Clinic closures are not expected to occur. All OTPs must coordinate any clinic service disruptions with HHSC’s Substance Use Disorder Compliance Unit’s (SUDCU’s) Statewide Opioid Treatment Authority (SOTA).

**NOTICE: Contact SUDCU if a patient at your clinic tests positive for COVID-19.**

Clinics are to document all actions, emergency response plan revisions, adverse events for patients, and guest dosing.

Sincerely,

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