What Needs to be Urgently Done to Stop the COVID-19 Pandemic

March 25, 2020

As patient safety advocates, our priority is to stop further coronavirus (COVID-19) spreading. Until a vaccine is available, screening and isolation are our only available tools to prevent the spread of this very contagious virus. To prevent the spread in health care settings, every health care worker needs appropriate protective equipment for every patient. We need to have widespread testing for this virus as soon as possible. Those fighting the virus need to know the prevalence and so does the public.

A collapsed or over-run public health care system will put everyone at risk of harm. This is already happening in some states. We are already far behind in halting the growing number of people with the virus. To reduce the number of new cases will require everyone to do their share including the government (federal, state, local), health care, and the general public.¹

The public urgently needs factual, educated, and consistent messages, from experts so that everyone can be better prepared to take proactive roles to stop the spread of this deadly virus. To protect yourself, practice social distancing,² be aware of how the virus is spread,³ and know the symptoms.⁴

How to protect yourself and the public responsibility:

• We advise people to avoid hospitals as much as possible – these facilities are for the very sick; the virus is most prevalent in hospitals and can spread there. If you have some symptoms, call your doctor (use telemedicine if available);⁵ if you can ride it out at home, do so. Social distancing is the most important weapon to fight this virus.

• If serious life threatening symptoms develop, like uncontrollable fever, chest pressure, severe breathing difficulty (struggling for each breath, only able to speak in single words, bluish lips) or unusual sleepiness, call 911 or go to your ER. If you can, call ahead or have someone call for you so health care personnel can greet you outside and move you swiftly into isolation.

• Have you been exposed?⁶ Stay home! ⁷

What the Federal Government should do:

• Federal policies must not put the economy above saving lives.

• Require all nonessential workers to stay home and self-isolate until the infection is controlled.

• Provide funds to replace wages for all workers who have been laid off or out of work due to shutdowns until the infection is controlled, including small businesses and self-employed workers.

• In coordination with state Governors, deploy federal employees - such as National Guard, other military and FEMA - to build temporary medical facilities to care for coronavirus patients staffed by military medical personnel and volunteers.

• Federal funding is needed for testing materials, medical equipment and protective supplies, and public education.
• Provide federal funds for multiple efforts to develop vaccines for the coronavirus to maximize our ability to have a vaccine within a year or sooner. Based on experience with vaccines for other viruses that are constantly changing, we will need more than one type of vaccine for the future.
• Social distancing should be ordered nationwide. Local governments should make sure the public is following social distancing and all other preventive measures to avoid the spread of the coronavirus.
• We urgently need to hear from leadership in epidemiology and pandemic experts on how to protect health care workers and the public during daily briefings, rather than political speakers. We need to hear directly from the CDC. If the White House Task Force will not bring these experts in, we urge the experts to hold their own daily briefings with the public.
• Create a national infectious disease response team of experts that is permanent and cannot be dismantled without the authority of Congress and the President.
• Create a federal team accountable for infection control supplies and equipment standards, inventories and safe practices. These should ensure timely distribution to locations most in need.
• Stop the political rhetoric.

Protecting health care workers:
• Use the full power of the federal government to increase manufacturing of protective equipment for medical professionals (masks, gloves, gowns, etc.). We need enough protective equipment for medical personnel to change out everything with each patient to prevent spreading the virus.
• Hospitals and other private health care businesses need to step up and take responsibility for their lack of preparation and to ensure the safety of their employees and the public they serve.
• Continue to identify sources of personal protective equipment (PPE) that are stocked in places other than hospitals and urgent care facilities in every community and share them with providers on the front lines of fighting coronavirus. Identify health care providers who can help including medical and nursing students and retired professionals who can help with triage and questions from the public.
• During this crisis, state regulatory boards should consider temporarily modifying requirements to allow doctors, nurses and other health care professionals licensed in other states to assist hot spot regions that are being overwhelmed. Boards should apply appropriate safeguards to ensure that the licenses of these professionals are in good standing in all states and not being investigated for serious complaints. Boards and health care employers should query the National Practitioner Data Bank for malpractice and medical discipline history.

Testing for coronavirus:
• More tests and faster tests, including self-tests, need to be manufactured so that every American can be tested within a month. Countries that have done the most testing have definitely reduced the number of people who contracted the virus. Every American should be able to self-test at home without the need to go to a health care facility or drive through testing station.
• Self-testing at home will preserve valuable PPE supplies and reduce the risk of spread. Self-testing will reinforce the need for people to shelter in place. It will help to identify those who are not ill but are spreading the virus.
• Understand the difference between needing a test and wanting one, as long as there are not enough supplies to test everyone. If you have symptoms CALL - don’t walk or drive to - your primary care doctor or hospital. Triaging, telemedicine advice and remote testing at specified sites can be done when needed.
• Create a self-reporting website that allows people to post real-time results with geographic visual reporting. Many hospitals have created their own tests but we don’t know where those results are being reported.
• Statistics of test results sent to CDC or any other national agency should be made public.
Drugs and medical devices:

• Research and testing of existing and new drugs for the treatment of coronavirus needs to be encouraged, done, well documented and the results shared with everyone.6 Priority should be for low cost generic treatments rather than granting high priced drugs exclusive distribution for a pandemic virus.9

• We support adapting treatments when health care systems become overwhelmed during this time of crisis, such as safely modifying one ventilator for multiple patients.

• FDA should proactively educate the public regarding potential drug harm to watch for and how to report harm, including providing quick references to drug information.

• Federal funding is needed for post-market surveillance at FDA for drugs and devices that are being fast tracked out into the health care system. This includes funding for FDA’s Medwatch adverse reporting system to be functioning and reviewed daily.

• Due to the emergency use of drugs/devices that have not been thoroughly tested, health care providers and patients need to be able to quickly report patient harm. Restore the Medwatch app so harm reports can be easily made using mobile phones.

1 Experts have called this “flattening the curve” explained here: https://thehill.com/changing-america/well-being/prevention-cures/487818-what-does-it-mean-to-flatten-the-curve-and-does


3 Coronavirus droplets can live in the air and on surfaces: https://hub.jhu.edu/2020/03/20/sars-cov-2-survive-on-surfaces/

4 Johns Hopkins provides a good basic overview: https://www.hopkinsmedicine.org/health/conditions-and-diseases/COVID-19/coronavirus-facts-infographic


6 The CDC has a detailed information about assessing whether someone has been exposed that is regularly updated – look for Table 1 and Table 2: https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html


8 Numerous drugs have been mentioned as potential treatment for coronavirus, although none have been tested or approved by FDA approved for that use. Several anti-malaria drugs are included as potential off-label use. People should be aware of the potential for short-term harms (such as headaches, nausea, rashes) and long-term harms [such as life-threatening and fatal cardiomyopathy that affects the heart muscle and pulmonary hypertension]. Manufacturer information: https://professionals.optumrx.com/content/dam/optum3/professional-optumrx/news/rxnews/drug-safety/drugsafety_plaquenil_2017-0201.pdf; Drugs.com on the drug’s potential harm: https://www.drugs.com/hydroxychloroquine.html