

The COVID-19 Self-Directed Clinical Pilot allows you to direct a custom rapid cycle quality improvement effort, by documenting the unprecedented and rapid changes that you had to make in the ways that you deliver care. Provided below are a few examples of interventions you can consider for meeting your ABFM Performance Improvement (PI) requirement, regardless of whether you provide continuous patient care.

50 Ideas for COVID-19 Quality Improvement Interventions

- 1) Prescreening patients for COVID symptoms prior to arrival
- 2) Temperature monitoring for patients
- 3) Temperature monitoring for staff
- 4) Symptom monitoring for staff
- 5) Video visits for patients with COVID-like symptoms
- 6) Video visits for non-COVID acute illness
- 7) Video visits for chronic disease management
- 8) Phone visits for patients who are unable to do video visits
- 9) Encouraging mask usage in the office for staff
- 10) Encouraging mask usage in the office for patients
- 11) Establishing and implementing policies for family members in the office
- 12) Education about mask usage for the public
- 13) Patient education about COVID
- 14) Advocacy on COVID with state/local government
- 15) Work on community COVID response plan
- 16) Office cleaning policies
- 17) Sick patient scheduling policies
- 18) Outdoor visits for sick patients
- 19) Appropriate PPE for sick visits
- 20) Appropriate PPE for office staff and providers
- 21) COVID vaccine promotion
- 22) COVID vaccine administration
- 23) Addressing health maintenance during COVID
- 24) Addressing chronic diseases during COVID
- 25) Tracking COVID infections
- 26) Coordinating care with Health Department for patients with COVID
- 27) Tracking COVID testing
- 28) Supporting local businesses in establishing COVID leave policies
- 29) Supporting schools in establishing COVID absence policies

- 30) Supporting nursing home/assisted living in establishing appropriate visitation policies
- 31) Helping establish practice emergency preparedness policies around COVID
- 32) Helping establish community emergency preparedness policies around COVID
- 33) Participating in media to educate the community about COVID
- 34) Using social media to educate patients and the public about COVID
- 35) Creating testing protocols for COVID
- 36) Creating vaccination protocols for COVID
- 37) Coordinating COVID vaccination in the community for patients
- 38) Addressing disparities in vaccine acceptance/administration
- 39) Addressing mask acceptance in minority populations
- 40) Addressing access to care for COVID in underinsured populations
- 41) Addressing fragmented care for patients with COVID symptoms
- 42) Addressing fragmented care for patient needing COVID vaccination
- 43) Checking for patient dealing with COVID-19
- 44) Protocols to support safety for families of individuals with COVID
- 45) Coordination of community services for families/individuals with COVID
- 46) Implementation of strategies to avoid hospitalization for patients with COVID
- 47) Tracking adverse reactions to vaccination
- 48) Development of program to recommend vaccines that are more acceptable to certain populations
- 49) Development of strategy to address vaccine hesitancy
- 50) Develop patient education resource to address the true risks of vaccination and the true risk of disease