

Ministry of Health Male', Republic of Maldives

Minimum Standard for establishing a resort clinic

This document is intended to provide minimum criteria required for operating a medical clinic at a resort island. The annex attached with these criteria is meant to guide the care of COVID-19 patients as the response capacity of health systems is challenged; to ensure that COVID-19 patients can access life-saving treatment, without compromising public health objectives and safety of health care professionals

1. There should be a medical clinic in every resort

2. Infrastructure of the clinic:

The clinic area should comprise of:

- 2.1 Consultation room
- 2.2 Observation room / treatment room
- 2.3 laboratory area for a simple laboratory set up (for point of care testing and basic laboratory devices)
- 2.4 waiting room
- 2.5 store
- 2.6 An area or cabinet to keep essential medicines
- 2.7 Toilette

2.8 Where the clinic want to set-up a laboratory – adhere to national laboratory standards

3. Human resources:

The clinic should have following minimum health professionals

- 3.1 One Medical Officer,
- 3.2 One Registered Nurse or Community Health Worker

4. General Requirements

- 4.1 The health professionals should be registered in the relevant council and should possess a valid practising license
- 4.2 The health professionals should be oriented to all relevant national guidelines, standards, laws, regulations relevant to health service
- 4.3 All relevant Clinical guidelines, standards, laws and regulations should be available at the clinic.
- 4.4 A list of medical services provided by the clinic (e.g. consultation, wound dressings, wound suturing etc) should be displayed in the clinic.
- 4.5 A daily record of patients consulted (resort staff and guests) should be kept at the clinic according to Medical record keeping Regulation
- 4.6 The clinic should have online or manual prescription. The chief complaints as well as patient's examination findings should be documented in addition to the diagnosis and treatment given. The clinic should file the copies of these documents for a definite period of time.
- 4.7 Important forms required by the ministry of health/ Health protection agency should be present in the clinic.
- 4.71 Communicable disease notification forms- All notification diseases should be informed using the communicable diseases notification forms
- 4.72 Medico-legal forms
- 4.7.3 Patient referral forms.
- 4.7.4 Medical certificate form

4.8 The management should ensure following trainings are completed by health professionals at the clinic

4.8.1 ACLS certification should be made mandatory for the resort doctor and nurse 4.8.2 Health care professionals and other staffs should be trained and oriented to all relevant guidelines, and should have competency to perform all the procedures 4.8.3 Health care professionals and other staffs should be trained in first aid, basic life support in use of medical procedures.

4.9 The management should ensure the following national screening should be conducted regularly or according to health related guidelines.

4.9.1 Infectious disease (Hepatitis A, Salmonella)

4.9.2 Non- communicable disease

4.10 The clinic should have minimum equipment and instruments according to Annex 1

4.11 The clinic should have essential drugs according to Annex 2

4.12 The protocol to respond suspected COVID-19 case in a resort to Annex 3

Anex 1: Important medical equipment for the clinic:

- 1. Dedicated fridge to store medicines
- 2. ECG machine should be a mandatory equipment
- 3. Defibrillator should be a mandatory equipment in the clinic
- 4. Manual or automated BP apparatus, thermometers, stethoscopes, ophthalmoscope, otoscope and other accessories for patient examination.
- 5. Suction machine
- 6. Examination lamps
- 7. Examination Bed
- 8. AEDs
- 9. Emergency resuscitation: Laryngoscopes, Ambu bags and masks, Endotracheal tubes, oxygen face masks and nasal canula should be available
- 10. An oxygen cylinder should be available at the clinic
- 11. An Emergency trolley kept ready at all times with all the resuscitation equipment and drugs used in cardiopulmonary resuscitation should be available in them
- 12. Surgical equipment for a bedside basic surgical procedure such as wound suturing, wound dressings.
- 13. Autoclave machine- Surgical instruments and materials should be autoclaved
- 14. Glucometer

Annex 2: Essential drug list:

1.	Inj. Hydrocortisone 100mg/ml injection				
2.	Inj Adrenaline (1 mg/ml) injection				
3.	Inj Atropine (0.65 mg /ml) injection				
4.	Inj. Amiodarone (150 mg/3ml) injection				
5.	Injection Lasix (10 mg/ml) injection				
6.	Inj. Avil (pheniramine maleate) (22.75mg/ml) injection				
7.	Inj Emeset (Ondansetron) (2mg/ml) injection				
8.	Inj Pantaprazole 40 mg injection				
9.	Inj Diclofenac (75 mg/3ml) injection				
10.	Inj Diazepam 10 mg injection				
11.	Inj Phenytoin (50mg/ml) injection				
12.	Tab Paracetamol				
13.	Syrup Paracetamol (120mg/5ml), (250 mg/5 ml)				
14.	Tab Fexofenadine				
15.	Syrup Cetirizine				
16.	Syrup Bromhexine				
17.	Syrup Dextromethorphan				
18.	Tab Prednisolone (5 mg tabs)				
19.	Asthaline Inhaler (100 micrograms)				
20.	Fluticasone/Salmeterol combination inhaler				
21.	Tab Diclofenac				
22.	Tab Pantoprazole				

23.	Tab Emeset 4 mg			
24.	Oral rehydration Salts (ORS)			
25.	C. Loperamide 2mg			
26.	Tab Clopidogrel 75 mg			
27.	Tab Aspirin 75 mg			
28.	Glyceryl Trinitrate sublingual tablet (0.5 mg)			
29.	Tab Atorvastatin 20 mg			
30.	Cap. Nifedipine 10 mg			
31.	Tab Amlodipine 10 mg			
32.	Tab Clonazepam 0.25 mg			
33.	Syrup Lactulose			
34.	Suppository Dulcolax			
35.	Asthaline solution for nebulization			
36.	Ipravent solution for nebulization			
37.	Tab Azithromycin 500 mg			
38.	Syrup Azithromycin (200mg/5ml)			
39.	Tab Augmentin 625 mg			
40.	Syrup Augmentin (228mg/5ml)			
41.	Tab Metronidazole 400 mg			
42.	Tab Ciprofloxacin 500 mg			
43.	Tobramycin eye drops 0.3%			
44.	Tobramycin eye ointment 0.3%			
45.	Betadine Solution for wound cleaning			
46.	Betadine ointment			
47.	IV Fluids NS			
48.	IV Fluids DNS			
49.	IV Fluid 25% Dextrose			

Minimum Standard for establishing a resort clinic

50.	Injection Tetanus Toxoid
51.	Inj Lignocaine 2% (local anesthesia for wound suturing)
52.	Cap: Amoxcycillin 500mg

Annex 3: Protocol to respond to a suspected COVID-19 case in a resort

Surveillance Case Definition							
Suspected case	If the patient fits criteria A , B or C given below, he/she is a suspected case of COVID-19 infection:						
	 A. Patient with any acute respiratory illness (fever* and at least one sign/symptom of respiratory disease (e.g. cough, shortness of breath), AND No other etiology that fully explains the clinical presentation 						
	AND A history of travel to or residence in a country/area or territory reporting local transmission of COVID-19 disease during the 14 days prior to symptom onset.						
	OR						
	 B. Patient with any respiratory illness AND having been in <i>contact</i> with a confirmed or probable COVID- 19 case in the last 14 days prior to onset of symptoms 						
	OR						
	 C. Patient with SARI AND no other etiology that fully explains the clinical presentation 						
	SARI is defined as an acute respiratory infection (ARI) with history of fever* or measured temperature ≥38°C and cough; with onset within last 14 days and requiring admission to hospital.						
	*Absence of fever does NOT exclude viral infection						

Protocol to respond to a suspected COVID-19 case in a resort

Health care workers (HCW) at medical facility in a resort should always wear appropriate personal protective equipment (PPE) when consulting a patient in the clinic or attending to a patient outside the clinic settings.

Appropriate PPE for HCW (doctor/nurse) when attending to a patient: Medical mask, face shield, gloves, scrub and disposable or reusable (washable) gown and closed shoes.

If performing any aerosol generating procedure an N95 mask should be worn instead of simple medical mask

If a staff or tourist has be examined for a respiratory complaint or fever (suspected COVID), it is preferable for the doctor to visit the staff or tourist in his/her room instead of bringing the patient over to the clinic. This is to keep the main clinic allocated preferably for non COVID cases and non COVID care. The resort could allocate a particular room as a waiting area/ temporary isolation area for patients with fever or ARI, for the doctor to attend and examine the patient in this room. If a patient requires a period of admission for observation or IV fluids, or oxygen therapy etc., the patient could be treated in this room. Hence the room/ area allocated for COVID care should have these medical facilities available. See Figure 1.

Protocol to respond to suspected COVID-19 at a tourist facility

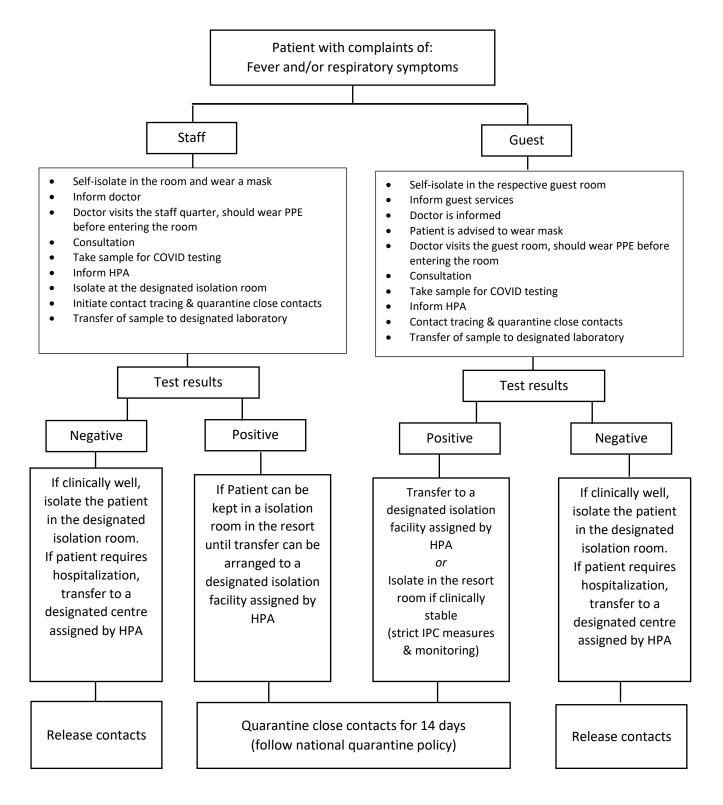


Figure 1- Protocol to respond to suspected COVID-19 at a tourist facility

Quarantine at resort

- 1. Guests as well as staffs may be quarantined at the resort.
- Guests may be quarantined at his/her own room while staffs will be moved to a dedicated quarantine facility at the resort
- The dedicated quarantine facility should have at least 5% of the total beds available for the staffs
- 4. The person should have a separate room with preferably an attached en-suite bathroom. If the toilet is shared with others the toilet should be cleaned and the frequently touched surfaces should be disinfected after use (with diluted bleach solution with 1ml of bleach in 9ml of water).
- 5. Quarantine individuals must follow instructions from HPA on infection and control measures
- Mask should be used by the quarantined person and others if there is any contact within 6 feet
- 7. Hand hygiene facility (access to soap and water or alcohol-based hand rub) should be available
- 8. Access to cleaning and disinfection materials should be available, including surface cleaning detergents and diluted bleach solution.
- Clean and disinfect frequently touched surfaces such as bedside tables, bedframes, and other bedroom furniture daily with regular household disinfectant containing a diluted bleach solution.
- 10. There should be mechanism to deliver food and water to the quarantined person.
- 11. Utensils and all personal items must be separated from those used for regular guests.
- 12. There should be mechanism for separate laundry and waste disposal.
- 13. Access to health care and daily self-reporting mechanism to HPA.
- 14. Access to information on COVID-19 including symptoms, danger signs, reporting mechanisms.
- 15. Establish a mechanism to provide psychosocial support.

- 16. COVID-19 PCR test should be done at the end of the 14 days quarantined period or anytime symptoms develop depending on the country testing strategy.
- 17. There should be a dedicated person to take care of the quarantined person if the quarantined person is older than 60 years or has severe comorbid conditions such as diabetes mellitus, cancer on chemotherapy or on medication causing immunosuppression, chronic kidney disease, chronic lung disease, ischemic heart disease, thalassemia or pregnancy is quarantined. The caretaker should use masks and ensure proper hand hygiene.

Isolation at the resort

- 1. Guests maybe isolated in their room or in designated Isolation facility at the resort.
- 2. Staffs will be isolated at a government run isolation facility.
- 3. Isolation should be in a single isolation room with attached toilets.
- 4. The room should preferably have good natural ventilation with open windows.
- 5. If a caretaker is required to stay with the patient:
- 6. Caretaker must always wear a surgical mask
 - a. Instruct care on infection control and prevention measures related to COVID
 - b. Ideally caretaker should be a person who is less than sixty years and without comorbid conditions such as diabetes, hypertension renal disease etc
 - c. Adequate supply of appropriate Personal Protective Equipment (PPE) and hand hygiene materials (gloves, mask for the caretaker and soap and water)
 - d. Availability of education materials on the IPC practices and COVID-19
 - e. Caretaker should stay in a separate room or be separated from the patient as much as possible.
- 7. Individuals in isolation facility must follow instructions from HPA on infection and control measures
- Mask should be used by the isolated person and others if there is any contact within
 6 feet
- 9. Hand hygiene facility (access to soap and water or alcohol-based hand rub) should be available

- 10. Access to cleaning and disinfection materials should be available, including surface cleaning detergents and diluted bleach solution.
- 11. Clean and disinfect frequently touched surfaces such as bedside tables, bedframes, and other bedroom furniture daily with regular household disinfectant containing a diluted bleach solution.
- 12. There should be mechanism to deliver food and water to the isolated person.
- 13. Utensils and all personal items must be separated from those used for regular guests
- 14. There should be mechanism for separate laundry and waste disposal.
- 15. Access to health care and daily self-reporting mechanism to HPA.
- 16. Access to information on COVID-19 including symptoms, danger signs, reporting mechanisms.
- 17. Establish a mechanism to provide psychosocial support.
- 18. If a person with comorbidities such as; ≥ 60 years, diabetes mellitus, cancer on chemotherapy or on medication causing immunosuppression, chronic kidney disease, chronic lung disease, ischemic heart disease, thalassemia or pregnancy is quarantined,
- 19. There should be a dedicated non exposed/ low risk contact to take care of the person. The caretaker should take responsibility for daily reporting to HPA.
- 20. The caretaker should use masks and ensure proper hand hygiene

COVID -19: ENVIRONMENTAL CLEANING FOR PUBLIC AREAS

This document can be applied to any non-healthcare setting such as guest rooms, restaurants, waiting areas, ferry terminal, ferry, bus, shops etc.

ALERT LEVEL	Environment cleaning		Cleaning of frequently touched surfaces (door knobs, handles, lift buttons, stair case railings, counter tops, switches, sink taps, tables, chairs, shopping basket/cart handles)	
	Frequency	Product	Frequency	Product
WHITE TO YELLOW	At least 2 times per day	Soap/detergent and water and rinse	At least 4 hourly	Soap/detergent and water and rinse -> disinfect with diluted bleach solution (1ml bleach in 49ml water)
ORANGE	At least 3 times per day	Soap/detergent and water and rinse	At least 2-3 hourly	Soap/detergent and water and rinse -> Disinfect with diluted bleach solution (1ml bleach in 49ml water)
RED	At least 4 times per day	Soap/detergent and water and rinse	At least 1-2 hourly	Soap/detergent and water and rinse -> Disinfect with diluted bleach solution (1ml bleach in 49ml water)

PPE to be used for cleaning and disinfection: Mask, goggles if splash is expected, work clothes, apron, gloves (may use reusable utility gloves and disinfect after use) and boots

- Ensure that the premises is well ventilated (open windows) during the procedures
- The cleaning frequency maybe increased depending on the number of people using the premises OR the hygienic condition of the premises
- After application of bleach solution, it is recommended to avoid touching/using the surfaces until after 10 minutes of application (if possible). This is to give time for the bleach solution to fully
- Wash hands with soap and water after cleaning

SOLUTIONS FOR DISINFECTION

- Regular cleaning: soap or detergent and water
- Disinfection:
 - Diluted bleach solution 1ml bleach in 49ml water or use 0.1% sodium hypochlorite solution

OR

- Surfaces where diluted bleach solution cannot be used (like metal) disinfectant containing 70% ethanol solution may be used.
 OR
- If an alternative disinfectant is used within the organization, this should be checked to ensure that it is effective against enveloped viruses (For a list of disinfectants that are approved by the Environmental Protection Agency (EPA) as effective against the virus that causes COVID-19, visit epa.gov/pesticide-registration/list-n-disinfectants-useagainst-sarscov-2

CLEANING OF USED EQUIPMENTS

- The clothes/ mop heads used for cleaning should be soaked for 10 minutes in soap/detergent solution in hot water (at 60 90 degrees C) and washed and rinsed well. Add Bleach if possible to the solution (½ cup or 118ml bleach to 3 ½ liters of water).
- Utility gloves maybe washed with soap and water.
- Dry the products well after cleaning.
- Disposable products should be properly disposed of after use.

COVID -19: ENVIRONMENTAL CLEANING FOR AREAS WITH SUSPECTED CASES

This document can be applied to any non-healthcare setting where a suspected or confirmed case resided

PPE

• Wear: Mask, Apron, Gloves (may use reusable gloves heavy duty gloves and cleaned afterwards), goggles and closed boots

• Area: keep well ventilated by opening the windows during cleaning and disinfection Product :

- For regular cleaning: Soap/ detergent with water
- Disinfection:
 - Diluted bleach solution 1ml bleach in 9ml water or use 0.5% sodium hypochlorite solution
 OR
 - Surfaces where diluted bleach solution cannot be used (like metal) disinfectant containing 70% ethanol solution may be used.

OR

 If an alternative disinfectant is used within the organization, this should be checked to ensure that it is effective against enveloped viruses (For a list of disinfectants that are approved by the Environmental Protection Agency (EPA) as effective against the virus that causes COVID-19, visit epa.gov/pesticideregistration/list-n-disinfectants-useagainst-sars-cov-2

Procedure:

- First clean all areas with Soap/detergent and water
- Rinse with water
- Disinfect with diluted bleach solution (1ml bleach in 9 ml water)
- Ensure that the premises is well ventilated (open windows) during the procedures
- Wash hands with soap and water after cleaning

CLEANING OF USED EQUIPMENTS

- The clothes/ mop heads used for cleaning should be soaked for 10 minutes in soap/detergent solution in hot water (at 60 90 degrees C) and washed and rinsed well. Add Bleach if possible to the solution (½ cup or 118ml bleach to 3 ½ liters of water).
- Utility gloves maybe washed with soap and water.
- Dry the products well after cleaning.

Minimum Standard for establishing a resort clinic

• Disposable products should be properly disposed of after use.