

Coronavirus Preparedness Checklist

Activity	Checklist	Recommendations	Resources
Screening	<ul style="list-style-type: none"> <input type="checkbox"/> Identify who will be screened (e.g. all patients, all visitors, vendors) <input type="checkbox"/> Identify which time points screening will take place <input type="checkbox"/> Identify who will be performing screening (e.g. receptionist, MAs) <input type="checkbox"/> Identify appropriate screening questions <input type="checkbox"/> Identify how positive screenings will be escalated and communicated <input type="checkbox"/> Stay-up-to date on latest information on local risk levels and CDC recommendations. Adapt and update screening protocol 	<ul style="list-style-type: none"> • Consider screening all patients and visitors upon entrance to practice setting (see sections below on methods to prevent non-essential persons from entering setting).ⁱ • Consider screening as early as you can. If possible, screen before persons enter areas where patients are present.ⁱⁱ • Consider signage, patient reminder calls, phone wait and answering message, other forms of communication instructing individuals with fevers/recent history of travel to call first. ² • Consider using “COVID-19 Screening Reference Tool” (see resources). • Plan for positive screening response should include methods for non-clinical staff to escalate to clinical and for clinical personnel to seek guidance of local health authorities when appropriate. 	<p>COVID-19 Screening Reference Tool available on Customer Center</p> <p>Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 (COVID-19) or Persons Under Investigation for COVID-19 in Healthcare Settings</p> <p>Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 (COVID-19) Exposures: Geographic Risk and Contacts of Laboratory-confirmed Cases</p>

	<p>and tools accordingly</p>	<p>(see “COVID-19 Screening Reference Tool”).</p> <ul style="list-style-type: none"> Refer to relevant CDC pages (see resources) and local recommendations daily. 	<p>Evaluating and Reporting Persons Under Investigation CDC</p> <p>Coronavirus Disease 2019 Information for Travel</p>
<p>Signage and hand-outs</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Identify appropriate signage for your setting and where will it be posted <input type="checkbox"/> Identify appropriate hand-outs for your setting 	<ul style="list-style-type: none"> Post screening questions with practice-specific instructions on next-steps outside of the clinic, at check-in and other strategic locations to receive information as early as possible.¹ Post changes in visitor policy as applicable outside and in waiting areas (see resources). Have isolation and PPE signage available to post outside of private rooms (see resources). Place information on hand hygiene and cough etiquette such as CDC “Stop the Germs” poster in high visibility locations and/or have copies available to provide to patients in languages commonly spoken at your practiceⁱⁱⁱ (see resources). Consider use of CDC handouts to communicate about COVID- 	<p>COVID19 Screening Reference Tool available on the Customer Center</p> <p>COVID19 Visitor Guide available on the Customer Center</p> <p>CDC Communication Tools Page Printable PDF in Multiple Languages Videos More</p> <p>Airborne Precaution Sign</p> <p>Droplet Precautions Sign</p> <p>Cover Your Cough CDC</p> <p>Stop the spread of germs CDC</p> <p>Handwashing CDC</p> <p>Keep calm and wash your hands CDC</p>

		<p>19 to staff and/or patients (see resources).</p>	<p>What you need to know about coronavirus disease 2019 (COVID-19) CDC</p>
<p>Visitor policies Vendors</p>	<ul style="list-style-type: none"> □ Establish policy for visitors (e.g. how many should be permitted to accompany a patient, what exceptions will be made if any, decision makers for exceptions) □ Establish plan for communication of changes in policy to patients 	<ul style="list-style-type: none"> • Discourage visitation and begin screening visitors even before COVID-19 is identified in their community.¹ • Consider canceling all non-essential visits by vendors or representatives. • Considering restricting visitors with recent travel to high risk areas or symptoms to enter.¹ • Consider using alternative methods for visitation (e.g., video conferencing).¹ • Send communication to patients and families of changes to visitor policies prior to arrival at practice setting.¹ • Post signs at the entrances to the facility instructing visitors not to enter if they have fever or symptoms of a respiratory infection.¹ • Consider having visitors sign visitor logs in case contact tracing becomes necessary.¹ 	

		<ul style="list-style-type: none"> • When allowed, visitors should be encouraged to frequently perform hand hygiene and limit their movement and interactions with others in the facility.¹ 	
<p>Sick, work from home and business travel policies</p>	<ul style="list-style-type: none"> □ Establish policy for non-essential travel, work from home, and sick leave for employees 	<ul style="list-style-type: none"> • Consider sick leave policies that are non-punitive, flexible and consistent with public health policies that allow ill healthcare personnel (HCP) to stay home. HCP should be reminded to not report to work when they are ill.³ • Create a list of non-essential personnel/those who can work remotely, as well as equipment and access needed to continue operations remotely. • Consider cancelling all non-contractual student observations. • Consider cancelling all large group meeting (greater than 25 people) in the affected areas. • Communicate regularly and ensure staff are aware of policies. ³ 	<p>Steps Healthcare Facilities Can Take Now to Prepare for Coronavirus Disease 2019 (COVID-19)</p>
<p>Phone triage</p>	<ul style="list-style-type: none"> □ Identify strategies to encourage phone triage of symptoms 	<ul style="list-style-type: none"> • Direct patients with symptoms and/or suspected exposure to contact office for phone triage.³ 	

	<ul style="list-style-type: none"> <input type="checkbox"/> Designate nursing staff for triage responsibilities (if not established at practice setting) <input type="checkbox"/> Ensure triage staff has access to appropriate screening tools, guidelines, contact numbers for public health officials 	<ul style="list-style-type: none"> • Consider calling patients the day before scheduled visit to phone triage prior to arrival. 	
<p>Rescheduling and alternative visits</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Establish policies for rescheduling <input type="checkbox"/> Identify options for telehealth 	<ul style="list-style-type: none"> • Consider proactively rescheduling routine one-year follow up visits (e.g. reschedule for March and April visits to late June/early July). • Consider rescheduling patients with recent travel to countries with outbreak to at least 14 days after return.² • If it is impractical to reschedule a patient with suspected COVID-19, coordinate with patients to be prepared for their arrival. Reschedule visits to end of day and meet patients outside and initiate isolation precautions. Or consider triaging them to a more appropriate setting.² • If patients are canceled due to known or suspected infection, 	<p>Traveler Info Card</p>

		<p>contact local health authorities for further direction.</p> <ul style="list-style-type: none"> • If available, consider use of telehealth visit as appropriate³. 	
<p>Isolation/PPE</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Designate rooms/areas to be used for isolation <input type="checkbox"/> Ensure clinical staff are familiar with PPE for contact, droplet, and airborne precautions <input type="checkbox"/> Review proper procedures for putting on and taking off PPE <input type="checkbox"/> Conduct an inventory of PPE <input type="checkbox"/> Identify the type of precautions for which the practice setting is currently equipped <input type="checkbox"/> Stay up to date on CDC recommendations for PPE and isolation precautions 	<ul style="list-style-type: none"> • Become familiar with “Precautions for Symptomatic Patients” document (see resources). • Consider isolating patients with respiratory symptoms in a private room with door closed immediately upon becoming aware.² • If isolation is not feasible for symptomatic patients, designate a well-ventilated space in waiting areas for ill patients to sit separated from other patients by at least 6 feet. Alternatively, medically stable patients might opt to wait in their personal vehicle or outside the healthcare facility where they can be contacted by mobile phone when an isolation room is available.² • Patients with respiratory symptoms should be brought back to an appropriate treatment area as soon as possible in order to minimize time in waiting areas.² 	<p>Precautions for Symptomatic Patients available on the Customer Center</p> <p>FAQ for Proper PPE</p> <p>Airborne Precaution Sign</p> <p>Droplet Precautions Sign</p>

		<ul style="list-style-type: none"> • Limit movement of patients with respiratory symptoms throughout the facility, for example if patient is to have labs drawn, make arrangement for phlebotomist to come to room. • Consider use of signage for reference on PPE procedures (see signage section above). • Consider designating staff to steward supplies.² 	
<p>Local contacts and required reporting</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Create and maintain emergency contact list and ensure the lists are accessible in key locations in your practice setting <input type="checkbox"/> Establish/maintain relationships with key healthcare and public health partners in your area. <input type="checkbox"/> Stay up to date on plans for managing infected patients and accepting transfers 	<ul style="list-style-type: none"> • Develop and continuously update emergency contact lists for key partners.^{iv} • Consider, proactively contacting sites of referral to stay up to date on their policies for managing and accepting patients.³ 	<p>State Health Department Contacts</p>
<p>Documentation</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Decide upon standards for 	<ul style="list-style-type: none"> • Recommend establishing policy for positively screened patients. 	

	documentation surrounding screening	Include what actions were taken (e.g. notified state/local officials, disposition to ED or PCP, recommend self-quarantine, etc.).	
Cleaning	<ul style="list-style-type: none"> <input type="checkbox"/> Ensure relevant staff are familiar with cleaning and disinfecting procedures <input type="checkbox"/> Conduct a full inventory of appropriate cleaning supplies <input type="checkbox"/> Coordinate with EVS regarding cleaning procedures and supplies 	<ul style="list-style-type: none"> • Become familiar with “Precautions for Symptomatic Patients” document (see resources). • For suspected or confirmed COVID-19, disinfect areas of patient contact and at least 6 feet in all directions from patient location. • Consult EVS and EPA references for proper cleaning guides. 	EPA's Registered Antimicrobials for COVID-19
Employee exposure	<ul style="list-style-type: none"> <input type="checkbox"/> Create protocol that outlines the steps to take in case of an exposure at your setting including contact tracing and notification 	<ul style="list-style-type: none"> • Identify who is responsible for: <ul style="list-style-type: none"> ○ Contact tracer of who was (potentially) exposed. ○ Notification of Health Department. ○ Notification to Human Resources for employee exposures. 	State Health Department Contacts
Staying informed on	<ul style="list-style-type: none"> <input type="checkbox"/> Identify list of relevant information 	<ul style="list-style-type: none"> • Due to the rapidly changing environment, it is 	CDC Coronavirus situation summary

<p>risk level and updates</p>	<p>sources for your area</p> <ul style="list-style-type: none"> <input type="checkbox"/> Create a plan to routinely check/ stay informed of changes 	<p>recommended you check back with the CDC daily.</p>	<p><u>Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 (COVID-19) or Persons Under Investigation for COVID-19 in Healthcare Settings.</u></p>
<p>Internal communication and decision making</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Be prepared by having and/or reviewing an internal emergency plan 	<ul style="list-style-type: none"> • Create emergency contact list with key stakeholders, make available at all facilities. 	
<p>Media policy</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Identify policy and/or person(s) responsible for media inquiries 		

ⁱ Centers for Disease Control and Prevention (2020, March 10). *Interim Additional Guidance for Infection Prevention and Control for Patients with Suspected or Confirmed COVID-19 in Nursing Homes.* <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>

ⁱⁱ Centers for Disease Control and Prevention (2020, March 10). *Interim Additional Guidance for Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Outpatient Hemodialysis Facilities.* <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/dialysis.html>

ⁱⁱⁱ Centers for Disease Control and Prevention (2020, March 10). *Steps Healthcare Facilities Can Take Now to Prepare for Coronavirus Disease 2019 (COVID-19).* <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/steps-to-prepare.html>

⁴Centers for Disease Control and Prevention (2020, March 10). *Information for Health Departments on Reporting a Person Under Investigation (PUI), or Presumptive Positive and Laboratory-Confirmed Cases of COVID-19* https://www.cdc.gov/coronavirus/2019-ncov/php/reporting-pui.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fphp%2Fcase-report-form.html