COVID-19 Best Practice Preparedness Checklist Level I

SITE NAME:	DATE:
RMD:	SMD:
DOO:	DCS:

This checklist is the first in a series of communications and readiness objectives that should be implemented in preparation for managing the COVID-19 global pandemic. We will expand on each of these items in more detail as circumstances evolve.

Protect and prepare your staff:	Done	In process	Not started
Inform and stress with staff that they should not work if they develop any infectious symptoms.			
Develop a jeopardy or shared staffing solution to cover gaps in coverage if needed.			
Share video on proper donning and doffing of protective gear.			

Patient care and hospital operations:	Done	In process	Not started
Evaluate patient flow for alternative evaluation/treatment space(s) and process to isolate triage of infectious complaints from rest of emergency patients. MSE to divert stable patients from entering ED treatment space.			
Consider virtual evaluation for MSE and triage assessments for stable, non-critical patients not requiring intervention or additional testing.			

Review the surge plan with the hospital:	Done	In process	Not started
Determine capabilities for critical patients including ventilators in the hospital.			
Begin discussions regarding emergency credentialing with hospital and Envision Physician Services			
Address needs for basic hospital supplies beyond protective gear such as pharmaceuticals.			

Disclaimer: This content is intended as a resource for clinicians caring for critically-ill COVID-19 patients, based on available evidence and recommendations of governing bodies. The recommendations do not replace clinical judgment or the need for individualized patient care plans. While we attempt to keep this information up-to-date, the literature on COVID-19 is rapidly evolving, and we suggest that practitioners search for the most up-to-date literature on any specific topic. These guidelines will also rapidly evolve as they are implemented into clinical practice and we receive feedback from practitioners. Additionally, local factors should be taken into account if utilized.

Education:	Done	In process	Not started
Send out web address to all providers: https://www.evhc.net/coronavirus			
Review the CDC page at least once a week for updates: https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html			
Communicate at least weekly on the state of preparedness.			
Communication:	Done	In process	Not started
Identify coronavirus EM champion and lead hospital champion.			
Establish contact with leadership at senior living, long-term care facilities, and other sites where outbreaks may occur.			
Verify EMS policy and disaster management protocols are tested.			

By: _____   By: _____

SMD   RMD

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