



## Hospital Preparedness Checklist for COVID-19 (Coronavirus)

March 13, 2020

<b>Education and Training</b>	
Employees are being trained on how to recognize potential cases. Trainings should review specific protocols for patients who are suspected of or have been diagnosed with COVID-19 for all disciplines (housekeeping, dietary, nursing etc.).	Procedures are in place to screen and assess patients for potential exposure or infection based on symptoms, travel history and exposure history. Once identified, procedure should be established to mask and isolated suspected cases.
Employees are being trained on the latest information on how the COVID-19 virus is transmitted.	Protocol is in place to promptly isolate patients who potentially have the virus — ideally in negative pressure rooms (rooms ventilated separately from the regular vent system to avoid cross-contamination) with the door always closed. These areas should be clearly designated.
Employees are being trained on contact, droplet, and airborne precautions for caring for patients with infectious disease.	Protocol is in place for employees to report potential exposure, be evaluated and treated and removed from the workplace (with full pay, seniority and benefits) during the incubation period if appropriate.
Employees are being trained on putting on and removing protective clothing (PPE).	Procedures are in place to verify adequacy of Personal Protective Equipment (PPE): Gowns, nitrile gloves, certified disposable N95 respirators (employees must be fitted), eye/face protection (goggles, face shield). N95 respirators should be checked for dates of expiration.
Employees are being trained on waste disposal techniques.	Plans are identified to prevent racial or ethnic profiling and/or unwarranted discrimination.
EVS employees are being trained in safe room cleaning procedures.	<b>Staffing</b>
<b>Protocols, Precautions, Equipment and Procedures</b>	Plans have been made to ensure adequate staffing in the case of a surge in patients. Plans for stand-by staffing for critical conditions has been updated to meet this challenge.
Protocol is in place to screen and assess patients for potential exposure or infection. Once identified, procedure should be established to mask and isolate suspected cases.	Additional housekeeping staff has been scheduled to increase cleaning and disinfection and limit spread
Protocol is in place to promptly isolate patients who potentially have the virus — ideally in negative pressure rooms (with the door always closed. These areas should be clearly designated.	<b>Communication</b>
Procedure is in place for employees to report potential exposure, be evaluated and treated and removed from the workplace (with full pay, seniority and benefits) during the incubation/isolation period if appropriate.	Employees are being reminded not to come to work if sick. Hospital leadership will remain in regular contact with labor partners to ensure effective communication.

