

## Hospital Preparedness Checklist

Although it is impossible to completely prepare for every scenario which could occur during an influenza pandemic, there are certain elements which should be included in your facility's plan. The checklist below is a good starting point. However, you should also "expect the unexpected" and try to build flexibility into your plan. Your facility will play a critical role in helping minimize the negative impact of an influenza pandemic on your community.

The following checklist<sup>20</sup> was extracted from the Healthcare Planning resource documents developed by the HHS. **Please refer to [www.pandemicflu.gov](http://www.pandemicflu.gov) for a more detailed planning guide.**

### 1. Structure for planning and decision making

- An internal, multi-disciplinary planning committee for influenza preparedness has been created.
- A state or local health department person has been identified as a committee liaison.
- A linkage with local or regional emergency preparedness groups has been established.

### 2. Development of a written pandemic influenza plan

- A written plan has been completed or is in progress that includes the elements listed in #3 below.
- Responsibilities of key personnel related to executing the plan have been described.
- A simulation exercise has been developed to test the effectiveness of the plan.

### 3. Elements of an influenza pandemic plan

- A surveillance plan has been developed.
  - Syndromic surveillance has been established in the emergency room.
  - Thresholds for heightened local surveillance for pandemic influenza have been established.
  - A system for internal review of pandemic influenza activity in patients presenting to the emergency department has been created.
  - A system of monitoring for nosocomial transmission of a pandemic has been implemented and tested by monitoring for non-pandemic influenza.
- A communication plan has been developed.
  - Responsibility for external communication has been assigned.
  - Key points of contact outside the facility have been identified.
  - A plan for updating key facility personnel on a daily basis has been established.
  - An education and training plan on pandemic influenza has been developed.
  - A plan is in place for rapidly training non-facility staff brought in to provide patient care.

- A triage and admission plan has been developed.
  - A location for triage of patients with possible pandemic influenza has been identified.
  - An isolation plan for patients with possible pandemic influenza has been developed.
  - A method for tracking the admission and discharge of patients with pandemic influenza has been developed.
  
- A facility access plan has been developed.
  - Protocols for limiting visitors and closing the facility to new admissions are in place.
  - Hospital Security has had input into procedures for enforcing facility access controls.
  
- An occupational health plan has been developed.
  - A system for rapidly delivering vaccine or antiviral prophylaxis to healthcare personnel has been developed.
  - A method for prioritizing healthcare personnel for receipt of vaccine or anti-viral prophylaxis based on level of patient contact and personal risk for influenza complications has been established.
  - A system for detecting symptomatic personnel before they report for duty has been developed.
  - A policy for managing healthcare personnel with symptoms of or documented pandemic influenza has been established.
  
- A vaccine and anti-viral use plan has been developed.
  - Contacts for obtaining influenza vaccine and anti-viral prophylaxis have been identified.
  - A priority list (based on HHS guidance) and estimated number of patients and healthcare personnel who would be targeted for influenza vaccination or anti-viral prophylaxis has been developed.
  - A system for rapidly distributing vaccine and anti-virals to patients has been developed.
  
- Issues related to surge capacity have been addressed.
  - A plan to address unmet staffing needs in the hospital is in place.
  - The minimum number and categories of personnel needed to care for a group of patients with pandemic influenza has been determined.
  - Strategies to increase bed capacity have been identified.
  - The estimated patient capacity for this facility is \_\_\_\_\_.
  
- Anticipated durable and consumable resource needs have been determined.
  
- A strategy for handling increased numbers of deceased persons has been developed.