Checklists

Introduction

The following checklists will help individuals, large businesses, health care facilities, and nonprofit or faith-based organizations prepare now for pandemic influenza (panflu). These checklists also will help in preparing for other prolonged and large-scale emergencies.

Although these checklists address many topics you will need to consider as you develop preparedness and response plans for panflu or other emergencies, they are not complete. Your business, organization, health care facility, or family will have unique needs. As a result, you may have to adapt these checklists to meet those needs. In some instances, you will need information from local/state public health or emergency response authorities to complete your plan. The U.S. Centers for Disease Control and Prevention (CDC) recommends regularly monitoring reliable Websites, such as www.pandemicflu.gov, for new and updated information.

Community and Faith-Based Organizations

Community-based and faith-based organizations will play an important role in protecting the public's health and safety in the event of panflu. This checklist will help social service agencies, churches, synagogues, and others think about and plan how to adjust their staffing and normal activities to maintain continuity of services during a pandemic.

Businesses

In the event of panflu, businesses should anticipate 10 percent to 40 percent of their employees being absent as a result of personal illness; family member illness; community containment measures and quarantines; and closures of school, other businesses, or public transportation. This checklist was developed with those contingencies in mind.

Individuals and Families

In the event of panflu or other large-scale emergency, one of the most important things families can do is to be prepared. During a pandemic, families may have to "shelter in place," because basic utilities may be interrupted and schools, businesses, and public transportation systems may be temporarily closed. If people cannot get to a store, or if stores are out of supplies, it will be important to have extra supplies on hand. This checklist was developed with those contingencies in mind.

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Family Emergency Health Chart

Families need to think about health issues that could arise if a pandemic occurs and how these issues could affect them. For example, if a mass vaccination clinic is set up in the community, families may need to provide as much information as they can about family members' medical history, especially if someone has a serious health condition or allergy.

Health Care Facilities

The checklists for **Hospitals**, **Hospital Triggers**, and **Medical Offices and Clinics** will help these facilities address topics such as staffing shortages, triage, surge capacity, altering standards of care, and when to activate panflu plans. These checklists will help health care facilities identify the strengths and weaknesses of their current panflu planning efforts. Many of the topics these checklists address also apply to other outpatient settings (e.g., dental, podiatric, and chiropractic offices, ambulatory surgery centers, hemodialysis centers).

Emergency Medical Services

In the event of panflu, emergency medical services (EMS) organizations will be involved in transporting acutely ill patients with known or suspected pandemic influenza to emergency departments; some of these patients might require mechanical ventilation for life support and/or other lifesaving interventions. Similarly, medical transport organizations will be called upon to transport recovering pandemic influenza patients to their home, residential care facility, or possibly to alternate care sites set up by state or local health departments. EMS and medical transport organizations can use this tool to self-assess and identify the strengths and weakness of current planning.

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Community and Faith-Based Organizations Checklist for Pandemic Flu Planning

Date

Preparedness Subject	Actions/Notes	Completed
1. Plan for the effects of panflu on the organization and mission.		
Decide who is responsible for preparedness and response plans. (Insert name) _____		
Identify and plan for situations that are likely to increase, decrease, or alter your regular activities or services.		
Consider the effect of a pandemic on outside resources needed to deliver services (e.g., supplies, travel, etc.).		
Outline an organizational structure for emergencies and revise periodically. Identify key contacts with multiple back-ups, roles and responsibilities, and who is supposed to report to whom.		
Identify essential staff, including volunteers, and train them to carry on during a prolonged emergency. Include cross-training and develop back-up plans.		
Test your plan, using an exercise or drill. Revise your plan as needed.		
2. Educate your staff, members, and community.		
Find and share up-to-date, reliable information; distribute basic information on panflu (e.g., signs and symptoms, cough etiquette, etc.) and family preparedness plans; when appropriate, include such information at public meetings (e.g., classes, trainings, sermons, etc.).		
Inform others in your organization and in the community about your preparedness and response plans.		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
Develop tools—such as Websites, flyers, local newspaper announcements, pre-recorded widely distributed phone messages, etc.—to communicate information about pandemic status and your organization's actions.		
Consider your organization's unique contribution to addressing rumors, misinformation, fear, and anxiety.		
Advise staff, members, and others you serve to follow information provided by public health authorities (e.g., local and state health departments, emergency management agencies, Centers for Disease Control and Prevention [CDC]).		
Ensure that what you communicate is appropriate for the cultures, languages, and reading levels of your staff, members, and those you serve.		
3. Plan for the impact on your staff, members, and community.		
Expect staff absences as a result of personal and/or family illnesses; quarantines; and school, business, and public transportation closures.		
Work with local health authorities to encourage everyone, especially high-risk populations, to get a yearly flu vaccination.		
Evaluate access to mental health and social services in your area. If possible, improve access to these services as needed.		
Identify individuals with special needs—such as the elderly, people with disabilities, and non-English speaking immigrants—and be sure to include their needs in your preparedness and response plans.		
• Establish relationships with them in advance so they will expect and trust your presence during a crisis.		
4. Develop panflu policies.		
Set guidelines that allow staff to take leave for illness or taking care of family members without being penalized.		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
Require mandatory sick leave for those who are suspected of being ill or become ill at the worksite.		
• Staff should remain at home until their symptoms resolve and they are physically ready to return to duty. (Know how to check up-to-date CDC recommendations.)		
Create flexible work schedules (such as telecommuting, staggering shifts, etc.)		
Evaluate—and modify, if necessary—normal activities and services that may help spread the virus from person to person.		
• Assess routine procedures during meetings or religious practices, such as hand-shaking, seating in meetings, office layout, shared work stations, etc.		
Follow the CDC recommendations on domestic and international travel, which may include recalling nonessential staff from affected areas and distributing health information to them.		
Set policies for activating your response plans and altering your operations accordingly.		
5. Allocate resources to protect your staff, members, and those you serve.		
Calculate supplies needed to promote respiratory hygiene and cough etiquette. Determine how they will be obtained.		
Focus your organization's efforts on providing services—such as mental/spiritual health or social services—that are most needed during the emergency.		
6. Align with other organizations.		
Learn the roles of federal, state, and local public health agencies and emergency responders; know what—and what not—to expect from each in the event of a pandemic.		

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Preparedness Subject	Actions/Notes	Completed
Take part in local and regional planning and assign a point of contact to maximize communication between your organization and your local and state public health agencies, emergency responders, local health care facilities, and insurers.		
• Assign a point of contact to maximize communication between your organization and pandemic planning partners. (Insert name) _____		
Coordinate with emergency responders and local health care facilities to improve availability of medical advice and services for your staff, members, and others you serve.		
Share what you've learned from developing your preparedness and response plan with others.		
Work together with others (e.g., associations, councils, denominations, etc.) to help your communities prepare for panflu.		

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Businesses Checklist for Pandemic Flu Planning

Date

Preparedness Subject	Actions/Notes	Completed
1. Plan for negative effects on your business.		
Designate a panflu preparedness coordinator and/or team. (Insert names.) _____ _____ _____ _____		
Identify essential employees and other critical inputs by location and function. (Insert names, locations, functions.) _____ _____ _____ _____		
Train and prepare ancillary workforce (e.g., contractors, employees in other jobs, retirees).		
Develop and plan for scenarios (e.g., quarantine, scarcity of hygiene supplies) that would increase or decrease demand for your products/services.		
Forecast how a pandemic may affect your company's finances. (Use multiple scenarios that would affect different products, production sites, etc.)		
Consider the effects of restrictions on domestic and international travel.		
Identify and regularly check sources of reliable information (e.g., local public health department, emergency management, etc.) on panflu.		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
Develop an emergency communications plan and revise it periodically.		
• Identify key contacts and backups.		
• Establish chain of communications (including suppliers and customers).		
• Determine processes for tracking and communicating business and employee status.		
Develop a simulation exercise to test the plan's effectiveness, conduct the exercise, and revise it periodically.		
2. Plan for the effects on employees and customers.		
Anticipate and allow for employee absences.		
Institute guidelines to modify and limit physical contact (e.g., hand-shaking, seating in meetings, office layout, shared workstations) among employees and between employees and customers.		
Encourage and track annual flu vaccination for employees.		
Review access to and availability of health care services for employees during a pandemic; improve services as needed.		
Evaluate access to and availability of mental health and social services (including corporate, community, and faith-based resources) for employees during a pandemic; improve services as needed.		
Identify requirements for employees and key customers with special needs and include those requirements in your preparedness plan.		
3. Establish policies to be implemented during a pandemic.		
Establish non-punitive, liberal leave policies for employees. (Also determine when an employee who is no longer infectious can return to work after illness.)		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
Develop flexible policies for the worksite (e.g., telecommuting) and work hours (e.g., staggered shifts).		
Establish policies for preventing the spread of flu at the worksite (e.g., promoting cough etiquette, promptly sending home employees with flu symptoms).		
Establish policies, such as immediate mandatory sick leave, for dealing with employees who have been exposed to panflu, are suspected of being ill, or become ill while at work.		
Establish policies for restricting travel to affected geographic areas (domestic and international), evacuating employees in affected areas when an outbreak begins, and guiding employees' return from affected areas.		
Set up authorities, triggers, and procedures for activating and terminating the company's response plan, altering business operations (e.g., shutting down operations in affected areas), and transferring business knowledge to key employees.		
4. Allocate resources to protect your employees and customers.		
Provide sufficient and accessible infection control supplies (e.g., hand-hygiene products, tissues and receptacles for their disposal).		
Enhance communications and IT infrastructures to support telecommuting and remote customer access.		
Ensure availability of medical consultation and advice for emergency response.		
5. Communicate to and educate your employees.		
Develop and disseminate programs and materials covering pandemic fundamentals (e.g., signs and symptoms of influenza, modes of transmission), personal and family protection and response strategies (e.g., hand hygiene, coughing/sneezing etiquette, contingency plans).		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
Anticipate employee fear, anxiety, rumors, and misinformation; plan communications accordingly.		
Ensure that communications are culturally and linguistically appropriate.		
Distribute information to employees about your pandemic preparedness and response plan.		
Provide information about at-home care of ill employees and family members.		
Develop hotlines, dedicated Websites, etc., for consistently communicating current pandemic status and actions, including redundancies in the emergency contact system, to employees, vendors, suppliers, and customers inside and outside the worksite.		
Identify community resources for timely and accurate pandemic information and for obtaining vaccines and antivirals.		
6. Coordinate with external organizations and help your community.		
Work with insurers, health plans, and major local health care facilities to share your pandemic plans and to understand their capabilities and plans.		
Work with federal, state, and local public health agencies and/or emergency responders to share your pandemic plans and to understand their capabilities and plans.		
Inform your local/state public health agencies and emergency responders about the assets and services your business could contribute to the community.		
Share best practices with other businesses in your community, chambers of commerce, and associations to improve community response efforts.		

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Individuals and Families Checklist for Pandemic Flu Planning

Date

Preparedness Subject	Actions/Notes	Completed
1. **Store a two-week supply of water and food for each family member** that includes**:**		
• ready-to-eat meals that require little water or cooking to prepare		
• canned meats, fish, fruits, vegetables, beans, and soups		
• protein or fruit bars		
• dry cereal or granola		
• peanut butter or nuts		
• dried fruit		
• crackers		
• canned juices		
• bottled water		
• tea, cocoa, coffee		
• comfort or favorite foods (such as cookies or candy bars)		
• foods for special needs (e.g., canned or jarred baby food and formula)		
• pet food		
• other non-perishable items		
• manual can opener		
2. **Create a medical kit** that includes, at a minimum:		
• prescription medications		
• medical supplies such as blood pressure or glucose monitoring kit		

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Preparedness Subject	Actions/Notes	Completed
• fever and pain relievers such as ibuprofen and acetaminophen		
• thermometer		
• vitamins		
• fluids with electrolytes		
• anti-diarrhea medication		
3. **Assemble an emergency resources kit** that includes, at a minimum:		
• camping stove and lanterns		
• portable radio		
• flashlight		
• batteries		
4. **Gather personal hygiene products,** including:		
• cleansing agent/soap		
• toilet paper		
• sanitary napkins		
• diapers		
• heavy-duty garbage bags		
5. **Develop a non-electronic entertainment kit for home** that includes:		
• books		
• board games		
• arts and crafts supplies		
• playing cards		
• gear for yard games (e.g., basketball, hopscotch, jump rope, baseball and mitts)		

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Family Emergency Health Chart

Create a family emergency health chart by filling in information for each family member in the space provided. This information can also help you and your family prepare for other emergencies.

Family Member Information

Family Member	Blood Type	Allergies	Past/Current Medical Conditions	Current Medications/Dosages

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Hospital Checklist for Pandemic Flu Planning

Date

Preparedness Subject	Actions/Notes	Completed
1. Structure for planning and decision making. Create an internal, multidisciplinary planning committee for pandemic influenza (panflu) preparedness.		
Designate a panflu preparedness coordinator. (Insert name) _____		
The planning committee includes the following hospital staff members (insert names):		
• Administration		
• Legal Counsel		
• Infection Control		
• Hospital Disaster Coordination		
• Risk Management		
• Facility Engineering		
• Nursing Administration		
• Medical Staff		
• Intensive Care		
• Emergency Department		
• Laboratory Services		
• Respiratory Therapy		
• Psychiatry		
• Environmental Services		
• Public Relations		
• Security		
• Materials Management		
• Staff Development		
• Occupational Health		
• Diagnostic Imaging		
• Pharmacy		
• Information Technology		
• Others		
• Others		

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Preparedness Subject	Actions/Notes	Completed
Identify a state or local health department person as a committee liaison. (Insert name) _____		
Link with local or regional emergency preparedness groups. (Planning Organization)		
2. Develop a written panflu plan. Include the elements listed in Number 3 below.		
Specify the circumstances under which the plan will be activated.		
Describe the organizational structure that will be used.		
Describe the responsibilities of key personnel involved in executing the plan.		
Develop a simulation exercise to test the plan's effectiveness.		
Perform the simulation exercise. (Date performed)		
3. Elements of an influenza pandemic plan.		
Develop a **surveillance plan**.		
• Establish syndromic surveillance in the emergency room.		
• Identify criteria for distinguishing panflu.		
• Assign responsibility for reviewing global, national, regional, and local influenza activity trends and informing the panflu coordinator of evidence of an emerging problem. (Name)		
• Establish thresholds for heightened local surveillance for panflu.		
• Create a system for internal review of panflu activity for ER patients.		
• Implement a tracking system for nosocomial transmission of pandemic and test it by monitoring for non-pandemic influenza.		

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Preparedness Subject	Actions/Notes	Completed
Develop a **communications plan**.		
• Assign responsibility for external communications.		
• person responsible for updating public health reporting		
• clinical spokesperson for the facility		
• media spokesperson for the facility		
• Identify key points of contact outside the facility.		
• state health department contact		
• local health department contact		
• newspaper contact(s)		
• radio contact(s		
• public official(s)		
• Create a list that identifies other health care facilities with which communication should be maintained.		
• Convene a meeting with local health care facilities to discuss a communication strategy.		
• Develop a plan for updating key facility personnel on a daily basis.		
• The person(s) responsible for providing these updates: _____		
• Develop a system to track panflu admissions/ discharges and test the system by monitoring non-pandemic influenza admissions/discharges in the community.		
• Establish a strategy for regularly updating clinical, ED, and outpatient staff on the status of panflu, once detected. (Responsible Person)		
• Establish a strategy for informing patients and visitors about the level of panflu activity.		
Develop an **education and training plan.**		
• Identify language and reading level-appropriate materials for educating all personnel about panflu and the facility's panflu plan.		
• Identify current and potential sites for long-distance and local education of clinicians on panflu.		

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Preparedness Subject	Actions/Notes	Completed
• Identify a means for accessing state and federal Web-based influenza training programs.		
• Put in place a system for tracking which personnel have completed pandemic influenza training.		
• Have a strategy for bringing in and rapidly training non-facility staff to provide patient care when the hospital reaches surge capacity.		
• The following groups of health care personnel have received training on the facility's influenza plan:		
• Attending Physicians		
• House Staff		
• Nursing Staff		
• Laboratory Staff		
• ER Personnel		
• Outpatient Personnel		
• Environmental Services Personnel		
• Engineering and Maintenance Personnel		
• Security Personnel		
• Nutrition Personnel		
Develop a **triage and admission plan**.		
• Identify a specific location for triage of patients with possible panflu.		
• Include use of signage to direct and instruct patients with possible panflu on the triage process.		
• Determine how to physically separate patients with possible pandemic influenza from other patients seeking medical attention.		
• Develop a system for phone triage of patients to prioritize patients who require a medical evaluation.		
• Establish criteria for determining which patients need a medical evaluation.		
• Develop a method for tracking admission/discharge of patients with panflu.		
• Test the tracking method by using non-pandemic influenza patients.		

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Preparedness Subject	Actions/Notes	Completed
Develop a **facility access plan**.		
• Establish criteria and protocols for closing the facility to new admissions.		
• Establish criteria and protocols for limiting visitors.		
• Obtain recommendations from hospital security on procedures for enforcing facility access controls.		
Develop an **occupational health plan**.		
• Develop a system for rapidly delivering vaccine or antiviral prophylaxis to health care personnel.		
• Test the system during a non-pandemic influenza season.		
• Establish a method for determining which health care personnel will receive vaccine or antiviral prophylaxis, based on level of patient contact and personal risk for influenza complications.		
• Develop a system for detecting symptomatic personnel before they report for duty.		
• Test this system during a non-pandemic influenza period.		
• Establish a policy for managing health care personnel with symptoms of or documented panflu. This policy considers:		
• when personnel may return to work after having panflu		
• when personnel who are symptomatic (but well enough to work) may continue to work		
• a method for furloughing or altering the work locations of personnel who are at high risk for influenza complications (e.g., pregnant women, those with compromised immune systems)		
• who will provide counseling to personnel during a pandemic (e.g., mental health and faith-based resources)		
• a strategy for housing personnel who may be needed onsite for prolonged periods of time		
• a strategy for accommodating and supporting personnel who have child or elder-care responsibilities		

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Preparedness Subject	Actions/Notes	Completed
Develop a **vaccine and antiviral use plan**.		
• Identify a contact for obtaining influenza vaccine. (Insert name) _____		
• Identify a contact for obtaining antiviral prophylaxis. (Insert name) _____		
• Develop a priority list (based on HHS guidance for use of vaccines and antivirals in a pandemic when in short supply) and estimated number of patients and health care personnel who would be targeted for influenza vaccination or antiviral prophylaxis.		
Estimated number of:		
• first priority personnel		
• second priority personnel		
• remaining personnel		
• first priority patients		
• second priority patients		
• Develop a system for rapidly distributing vaccine and antivirals to patients.		
Address issues related to **surge capacity**.		
• Anticipate unmet staffing needs.		
• Determine minimum number and categories of personnel needed to care for a group of panflu patients.		
• Assign responsibility for day-to-day clinical staffing needs. Persons responsible: (Names and/or Titles) _____		
• Have legal counsel review emergency laws for using health care personnel with out-of-state licenses.		
• Have legal counsel resolve concerns about insurance and other liability.		
• Establish criteria for declaring a "staffing crisis" to allow emergency staffing alternatives.		
• Link to local and regional planning and response groups to collaborate on widespread staffing shortages during a crisis.		

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Preparedness Subject	Actions/Notes	Completed
• Create a priority list for reassignment and recruitment of personnel.		
• Develop a method for rapidly credentialing newly recruited personnel.		
• Sign Mutual AID Agreements (MAAs) and Memoranda of Understanding/Agreements (MOU/As) with other facilities to share staff, as needed.		
• Identify strategies to increase bed capacity.		
• Establish a threshold for canceling elective admissions and surgeries.		
• Sign MOAs with facilities that would accept non-influenza patients in order to free-up bed space.		
• Identify areas of the facility that could be used for expanded bed space.		
• Estimate the patient capacity for this facility.		
• Discuss plans for expanded bed capacity with local and regional planning groups.		
• Determine anticipated durable and consumable resource needs.		
• Develop a primary plan and contingency plan to address supply shortages.		
• Discuss plans for obtaining limited resources with local and regional planning and response groups.		
• Develop a strategy for handling increased numbers of deceased persons.		
• Discuss plans for expanding morgue capacity with local and regional planning groups.		
• Involve local morticians in planning discussions.		
• Use mortality estimates to calculate the number of body bags and shrouds.		
• Identify supply sources for postmortem materials.		

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Hospital Panflu Triggers

Pandemic Level	Suggested Actions
Interpandemic Period	• Conduct planning. • Conduct education/training. • Conduct hospital surveillance for influenza.
Pandemic Alert	• Increase preparation; refine local plan. • Conduct hospital surveillance for influenza.
Pandemic Period Panflu *outside* the United States	• Establish contact with key public health, health care, and community partners. • Carry out hospital surveillance for panflu in incoming patients and previously admitted patients. • Put into place a system for detecting and treating early on health care workers who might be infected with panflu. • Strengthen infection control measures to prevent the spread of influenza. • Accelerate staff education and training according to your facility's panflu plan.
Pandemic Period Panflu *inside* the United States	As above, plus: • Initiate activities to increase capacity, supplement staff, and provide supplies and equipment. • Maintain close contact with and among health care facilities and with local and state health departments. • Post signs for respiratory hygiene/cough etiquette. • Maintain high index of suspicion that patients presenting with flu-like illness could be infected with panflu. **If pandemic strain is detected in local patient, community transmission can be assumed and hospital would move to next level of response.**

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Pandemic Level	Suggested Actions

Panflu in the local area	As above, plus:
	• Emergency Department (ED)
	  • Establish segregated waiting areas for those who have flu symptoms.
	  • Triage by phone to discourage unnecessary ED/outpatient department visits.
	  • Enforce respiratory hygiene/cough etiquette.
	• Facility Access
	  • Limit number of visitors to those essential for patient support.
	  • Screen all visitors at point of entry to facility for signs and symptoms of flu.
	  • Limit points of entry to facility; assign clinical staff to screen entrants.
	• Hospital Admissions
	  • Defer elective admissions and procedures until local epidemic wanes.
	  • Discharge patients as soon as possible.
	  • Cohort patients admitted with the flu.
	  • Monitor for nosocomial transmission.
	• Staffing Practices
	  • Consider furlough or reassignment for staff at high risk for complications of influenza (e.g., pregnant, immuno-compromised).
	  • Consider reassigning nonessential staff to support critical hospital services or placing them or administrative leave; cohort staff caring for flu patients.
	  • Consider assigning staff recovering from flu to care for flu patients.
	  • Activate system for detecting and reporting signs and symptoms of flu in staff reporting for duty.
	  • Provide staff with antiviral prophylaxis.

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Pandemic Level	Suggested Actions
Nosocomial transmission	As above, plus, if nosocomial transmission is limited to only a small number of units in the facility: • Close units with nosocomial transmission. • Cohort staff and patients. • Restrict new admissions (except for other panflu patients) to affected units. • Ensure that only those who are essential for patient support visit affected units.
Widespread transmission in the community and hospital; patient admissions surge capacity	As above, plus: • Redirect staff resources to support patient care (e.g., administrative clinical staff, clinical staff working in departments that have been closed [e.g., physical/occupational therapy, cardiac catheterization]). • Recruit community volunteers (e.g., retired nurses and physicians, clinical staff working in outpatient settings). • Consider administrative leave for all non-essential staff who cannot be reassigned to support critical services.

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Medical Offices and Clinics Checklist for Pandemic Flu Planning

Date

Preparedness Subject	Actions/Notes	Completed
1. Structure for planning and decision making. Incorporate panflu into plans for managing the medical office or clinic during an emergency.		
Create a planning committee specifically to address panflu preparedness.		
Designate a panflu response coordinator. (Insert name, title, and contact information.) _____ _____ _____		
The planning committee includes: (Insert below or attach list with name, title, and contact information for each.) • Administration _____ _____ _____		
• Medical Staff _____ _____ _____		
• Nursing _____ _____ _____		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
• Reception _____ _____ _____		
• Environmental Services (if applicable) _____ _____ _____		
• Clinic Laboratory Personnel (if applicable) _____ _____ _____		
• Others _____ _____ _____ _____ _____ _____ _____		
Identify a point of contact (e.g., clinic personnel responsible for infection control, outside consultant) for information on measures to prevent spreading panflu. (Insert name, title, and contact information.) _____ _____ _____		

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Preparedness Subject	Actions/Notes	Completed
2. Develop a written panflu plan. Include the elements listed in Number 3 below.		
Copy relevant sections of the U.S. Department of Health and Human Services Pandemic Influenza Plan (www.hhs.gov/pandemicflu/plan); obtain copies of state pandemic plans.		
Describe the organizational structure (i.e., lines of authority) that will be used to carry out the plan.		
Ensure that the clinic's plan incorporates and complements the community response plan.		
3. Delineate a panflu plan.		
Put into place a plan for tracking and detecting panflu in patients.		
• Designate someone to monitor public health advisories (federal and state) and inform the panflu planning committee and/or the panflu response coordinator when panflu is in the United States and when it is nearing your state and/or city. (For more information, see www.cdc.gov/flu/weekly/fluactivity.htm) (Insert name, title and contact information.) _____ _____ _____		
• Create a system to monitor and review seasonal flu among patients (i.e., weekly or daily number of patients who call or visit the clinic with flu-like illness) and among staff. (Tracking seasonal flu now ensures that the monitoring system for panflu will be effective and that clinics can detect stressors that may affect organizational capacity, such as staffing and supply needs and hospital and emergency department capacity and supply needs during a pandemic.)		
• Put in place a system for reporting unusual cases of flu-like illness and flu to the local or state health department.		

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Preparedness Subject	Actions/Notes	Completed
Develop a **communications plan**.		
• Identify points of contact in public health for panflu and determine how your office will communicate with them (e.g., telephone, fax, or e-mail). Local health department: (Insert name, title, and contact information.) _____ _____ _____		
State health department: (Insert name, title, and contact information.) _____ _____ _____		
• Designate a staff member as a point person for external communication. (Insert name, title, and contact information.) _____ _____ _____ (Having one person who speaks with the health department, and if necessary, media, local politicians, etc., will help ensure that your clinic provides consistent communication.)		
• Create a list of health care entities and their points of contact (e.g., local hospitals/health facilities; home health care agencies; social service agencies; emergency medical services; commercial and clinical laboratories; relevant community organizations, including those involved with disaster preparedness) with whom it will be necessary to maintain communication and coordination of care during a pandemic. (Attach or insert location of contact list.) _____		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
• Have the pandemic response coordinator obtain information on communication and coordination plans, including notification when such plans are updated, from local or regional panflu planning groups.		
• Create a list or database with contact information on patients who have regularly scheduled visits. Use this list during a pandemic to reschedule patients' office visits or assign them to another point of care. (Insert location of list/database.) _____		
Develop an **education and training program** to ensure that all personnel understand the implications of, and control measures for, pandemic influenza.		
• Designate someone to coordinate education and training (e.g., identify programs, help staff register or pay for programs, maintain attendance records, etc.). (Insert name, title, and contact information.) _____ _____ _____		
• Identify current and potential educational opportunities for staff (e.g., long-distance, online learning; programs offered locally by the health department, hospital, professional organizations, or others).		
• Identify and plan to obtain materials on panflu that are language and reading-level appropriate for professional, allied, and support personnel. (Such materials are available through state and federal public health agencies and professional organizations.)		
• Include information on infection control measures to prevent the spread of pandemic influenza in education and training activities.		

Adapted from lists developed by DHHS and CDC.

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Preparedness Subject	Actions/Notes	Completed
Identify and plan to **obtain materials for patients on panflu** that are language and reading-level appropriate.		
• Establish the roles of medical and nursing personnel in providing health care guidance for patients with panflu.		
Develop a plan for **triaging and managing patients**.		
• Create a system to triage patients by phone (and e-mail, where appropriate) to limit office visits to the medically necessary.		
• Develop plans to manage patient care at the height of the pandemic.		
• Cancel non-essential visits (e.g., annual physicals).		
• Plan separate blocks of time for non-influenza and influenza-related patient care.		
• Discuss plans and criteria for patient care following a medical evaluation (e.g., hospitalization, home health care services, self- or family-based care at home) with local hospital and health care agencies and local health department. (Flexibility will be necessary based on hospital bed capacity.)		
Develop an **infection control plan** that includes:		
• A specific and segregated waiting room for symptomatic patients. (In very small waiting rooms this may be infeasible. Instead, emphasize the use of masks.)		
• Guidelines for respiratory hygiene/cough etiquette, which should include:		
• Language-appropriate posters directing patients and their escorts to notify the receptionist if they have symptoms of panflu.		
• Language-appropriate posters on respiratory hygiene/cough etiquette.		
• Masks for symptomatic patients who are able to wear them (adult and pediatric sizes should be available), facial tissues (and disposal receptacles), hand sanitizers in waiting areas and examination rooms.		

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Preparedness Subject	Actions/Notes	Completed
• Implementation of respiratory hygiene/ cough etiquette during flu season and when other respiratory viruses are circulating in communities.		
• Separate examination rooms for evaluating patients with symptoms of panflu.		
• Use of Standard and Droplet Precautions (i.e., mask for close contact) by health care personnel for symptomatic patients.		
• Protection of reception and triage personnel at initial points of patient encounter.		
Develop a **vaccine and viral use plan**.		
• Identify Websites for federal and/or state health department recommendations on the use and availability of panflu vaccines and antiviral medications.		
• Estimate the number of personnel and first and second priority patients for panflu vaccine or antiviral prophylaxis. (Use this estimate for notifying priority patients, anticipating staffing requirements, and for procuring vaccine and antivirals.)		
Develop an **occupational health plan**.		
• Provide a liberal/non-punitive sick leave policy for employees who are symptomatic or have been diagnosed with panflu. This policy considers:		
• how to handle employees who become ill at work		
• when employees may return to work after recovering from pandemic influenza		
• when employees who are symptomatic, but well enough to work, will be permitted to continue working		
• employees who need to care for ill family members		
• Create a system for evaluating symptomatic employees before they report for duty. (This system should be tested during a non-emergency period.)		

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Preparedness Subject	Actions/Notes	Completed
• Ensure that mental health and faith-based resources are available to counsel personnel during a pandemic.		
• Place personnel who are at increased risk for flu complications (e.g., pregnant women, immuno-compromised health care workers) on administrative leave or alter their work location.		
• Enhance the ability to monitor seasonal flu vaccination of personnel.		
• Offer annual flu vaccine to personnel.		
Address issues related to **surge capacity** (i.e., dealing with an influx of patients and staff and supply shortages).		
• Address plans for managing a staffing shortage within the organization due to illness in personnel or their family members.		
• Encourage staff to develop plans for the care of their dependent minors and seniors in the event containment measures (e.g., school closures) are executed.		
• Determine the minimum number and categories of personnel necessary to keep the office/clinic open on a given day.		
• Address plans for either closing the office/clinic or recruiting temporary personnel during a staffing crisis.		
• Estimate the need for consumable resources (e.g., masks, gloves, hand hygiene products, medical supplies).		
• Develop a primary plan and contingency plan to address supply shortages. Ensure each plan details procedures for acquiring supplies through normal channels and when normal channel resources have been exhausted.		
• Stockpile at least a week's supply of consumable resources, including all necessary medical supplies.		

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Emergency Medical Services Checklist for Pandemic Flu Planning

Date

Preparedness Subject	Actions Needed	Completed
1. Address planning and coordination.		
Incorporate panflu into emergency management planning and exercises.		
Create a committee specifically to address panflu preparedness.		
Assign responsibility for coordinating the agency's panflu preparedness plan (a pandemic response coordinator) to one person. (Insert name and contact information.) _____ _____		
The planning committee includes the following people: (Insert names and contact information below or attach a list with names and contact information for each.)		
• Administration _____ _____		
• Medical staff _____ _____		
• EMS providers _____ _____		
• Personnel at dispatch center/phone triage _____ _____		
• Emergency management officer _____ _____		

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Preparedness Subject	Actions/Notes	Completed
• Local and state health official _____ _____		
• Law enforcement official _____ _____		
Identify a point of contact (staff member or consultant) for information and advice on infection control. (Insert name and contact information.) _____ _____		
2. Develop a written panflu plan. Include the elements listed in Number 3 below.		
Obtain copies of relevant sections of the U.S. Department of Health and Human Services Pandemic Influenza Plan (www.hhs.gov/pandemicflu/plan).		
Obtain copies of local and state panflu plans.		
Describe the organizational structure (i.e., lines of authority) that will be used to ensure the plan will be effectively and efficiently managed.		
Ensure that the plan complements or is part of the community's response plan.		

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Preparedness Subject	Actions/Notes	Completed
3. Elements of a pandemic influenza plan.		
Institute a plan to monitor and detect panflu in the population served and the appropriate organizational response.		
Identify someone to monitor national and state public health advisories and to inform the pandemic response coordinator when cases of panflu have been reported in the United States and when they are in the area (city, county, or state). (Insert name and contact information.) _____ _____		
Create a system to track flu-like illness in patients transported to hospitals and among EMS staff and to report this information weekly or daily to the pandemic response coordinator. (Having a system for tracking trends of illness in patients and staff during seasonal flu will ensure that organizations can detect stressors that may affect operating capacity, such as staffing and supply needs, and hospital and emergency department capacity during a pandemic.)		
Develop a communications plan.		
Identify points of contact. (Insert name and contact information for each.)		
• Local health department _____ _____		
• State health department _____ _____		

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Preparedness Subject	Actions/Notes	Completed
• Local emergency management _____ _____		
• State emergency management _____ _____		
• Federal health emergency _____ _____		
Assign one person as the point of contact for external communication. (Insert name and contact information.) _____ _____ (Having one person who speaks with the health department, and if necessary, the media, local politicians, etc., will help ensure that your agency provides consistent communication.)		
Create a list of health care entities (e.g., other local EMS and medical transport organizations, local hospitals and their emergency departments, community health centers, residential care facilities) and their points of contact. (Insert names and locations or attach separate list.) _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____		

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Preparedness Subject	Actions/Notes	Completed
The pandemic response coordinator has obtained information from local or regional panflu planning groups on communication and coordination plans, including how EMS will be represented in the planning process.		
The pandemic response coordinator has contacted other EMS and medical transport organizations regarding pandemic influenza planning and coordination of services.		
Develop an education and training plan to ensure that all personnel understand the implications of, and control measures for, panflu and the current organization and community response plans.		
Designate a person to coordinate education and training (e.g., identify and facilitate access to education and training programs, ensure that staff attend, and maintain a record of attendance at education and training programs). (Insert name and contact information.) _____ _____		
Identify current and potential long-distance (e.g., Web-based) and local (e.g., health department or hospital sponsored programs, programs offered by professional organizations or federal agencies) opportunities for education and training.		
Identify and obtain materials for professional and non-professional personnel on panflu that are appropriate for various language and reading levels. (Such materials are available from state and federal public health agencies and professional organizations.)		
Include information on infection control measures to prevent the spread of panflu in education and training materials.		
Incorporate differences between responding to panflu and a mass casualty event into training and education programs.		

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Preparedness Subject	Actions/Notes	Completed
Develop a plan for triaging and managing patients during a pandemic.		
Create a system for phone triage of patients calling 911 or other emergency numbers that includes criteria and coordination protocols to determine who needs emergency transport and points of referral for patients who do not need emergency transport.		
• Provide a list of appropriate numbers. (Include names and contact information.) _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ Coordinate plans with receiving facilities (e.g., hospital emergency departments), other EMS and medical transport organizations, and local planning groups for transporting large numbers of patients at the height of the pandemic.		
Develop policies and procedures for transporting multiple patients with panflu during a single ambulance run.		
Consider the possible necessity of sharing transportation resources or using vehicles other than those designed for emergency or medical transport (e.g., buses).		
Teach and promote use of respiratory etiquette during episodes of seasonal flu and other respiratory viruses (e.g., respiratory syncytial virus, parainfluenza virus).		

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Preparedness Subject	Actions/Notes	Completed
Ensure that health care personnel comply with Standard Precautions and Droplet Precautions when treating symptomatic patients.		
Develop an occupational health plan.		
Establish a liberal/non-punitive sick leave policy for managing EMS and medical transport personnel who have symptoms of, or documented illness with, panflu.		
The sick leave policy considers:		
• Handling staff who become ill at work.		
• Determining when staff may return to work after recovering from panflu.		
• Deciding when to allow staff who are symptomatic but well enough to work to continue working.		
• Helping staff who need to care for family members who are ill.		
• Developing a system for evaluating symptomatic staff before they report for duty. (Test this system before a pandemic occurs.)		
• Providing a list of mental health and faith-based resources to provide counseling during a pandemic.		
• Putting on administrative leave or altering the work locations of staff who are at increased risk of complications from influenza (e.g., those who are pregnant or have compromised immune systems).		
• Monitoring seasonal flu vaccine for staff.		
• Offering annual flu vaccine to staff.		
Develop a plan for administering vaccine and antivirals.		
Identify Websites containing CDC and state health department recommendations for use and availability of vaccines and antiviral medications.		
Estimate the number of personnel who will be targeted as first and second priority recipients of panflu vaccine and antiviral prophylaxis, based on HHS guidelines.		

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Preparedness Subject	Actions/Notes	Completed
Hold discussions with local and/or state health departments regarding the role of your agency in a large-scale program to distribute vaccine and antivirals to the general population.		
Address concerns related to surge capacity during a pandemic.		
Plan for staffing shortages that result from staff illness, staying home to care for sick family members, or social distancing measures.		
Determine the minimum number and categories of personnel needed to sustain EMS and medical transport services on a day-to-day basis.		
Collaborate with other local EMS and medical transport providers to develop contingency staffing plans.		
Consult with hospitals and regional planning groups regarding contingency staffing resources.		
Estimate the need for consumable resources (e.g., masks, gloves, hand hygiene products).		
Develop a primary plan and a contingency plan to address supply shortages. Include detailed procedures for acquiring supplies through normal channels and requesting resources for replenishing supplies when normal channels have been exhausted.		
• Plan to stockpile at least a week's supply of resources when evidence exists that panflu has reached the United States.		
Ensure that staff understand the process for requesting and obtaining assets for the organization through the community response plan.		

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