

Fall COVID 19 Checklist

Operations:

- PPE basics: Masks (face masks and N95), Gloves, Eye Protection, Gowns, hand sanitizer, wipes
- You know how much of each PPE type your use:
 - By patient type, if more COVID 19 patients are admitted
 - If you provide masks to COVID patients to wear when staff is present, that is added
 - All types of use, such as more gloves associated with Rapid Antigen or POC testing
 - A staff member has responsibility for inventory, calculating a burn rate and ordering <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/burn-calculator.html>
- You have a reliable source of PPE that offers non-counterfeit products.
- You have policies and procedures defining the 'trigger point' for extended use each type of PPE. You defined who makes the decision and communicates it.
- You have a process to ensure staff are using the right PPE for the right purposes, avoiding overuse
- You use community-based infection ratings for where staff are providing care and where they live, and you know what you will do if ratings change – impact on operations and staffing.
 - A staff member is assigned to get the community ratings and communicate
- Your team knows who to contact at the health department and for what.
- When a vaccine becomes available, who is responsible to reach out to the health department about vaccinating your staff and vulnerable patients. You have or are making the decision about being a vaccinator.

Patient Care:

- A process in place and working at the point of patient referral to screen for COVID 19 status
- The Communication process to advise staff of patient COVID status is working and includes advising number of days of quarantine to implement.
- Care planning includes deciding what can be done by phone, two-way audio/video and what requires in-person care.
- Care planning considers patient disease categories making them most vulnerable for a severe response to COVID infection, and teaching is included

Staff Training and Practice:

- Staff regularly receiving the message, wearing PPE associated with risk of infection continues into the future, at work and at home.
- You ensure staff are using PPE correctly in the home (e.g. don and doff, how long to reuse, following Standard Transmission Precautions) CDC video of don/doff - Donning <https://youtu.be/H4jQUBAIBrI> ; Doffing: <https://www.youtube.com/watch?v=PQxOc13DxvQ>
- Staff continue to monitor symptoms and report
- The protocol for responding to staff with COVID symptoms or exposure to possible or confirmed COVID is known and followed.
- Staff know how you are handling time off for COVID quarantine.
- Staff understand to tell you any time their risk level changes (e.g. elderly parent moves in, diagnosed with diabetes, etc.)

Communication:

- Inform staff how you are managing PPE-if there will be enough, and plans to handle COVID 19 admissions, as well as acknowledge what is and is not happening with COVID infection in your community and someone of the staff is watching.
- Tell staff who is responsible to initiate extended use for any type of PPE or report supply issues
- What is the most effective way to bring up staff concerns
- Weekly communication to staff is accomplished
 - more frequent outreach occurs based on staff anxiety
 - Resilience is appreciated and celebrated, personal staff and company milestones are share and celebrated (birthdays, work anniversaries, becoming parents, grandparents, etc.)

Thank you for what you do each day, the CHAP Team!

