Preparedness Needs Checklist for Respiratory Infections in Long-Term Care Settings

Development of a Written Preparedness Plan

A copy of the COVID-19 preparedness plan is available at the facility and accessible by staff.

[ ] Completed [ ] In Progress [ ] Not Started

Relevant sections of federal, state, regional, or local plans for COVID-19 or pandemic influenza are reviewed for incorporation into the facility’s plan.

[ ] Completed [ ] In Progress [ ] Not Started

The plan identifies the person(s) authorized to implement the plan and the organizational structure that will be used.

[ ] Completed [ ] In Progress [ ] Not Started

Elements of a Preparedness Plan

A plan is in place for protecting residents, healthcare personnel, and visitors from respiratory infections, including COVID-19 and influenza.

[ ] Completed [ ] In Progress [ ] Not Started

A person has been assigned responsibility for monitoring public health advisories (federal and state).

[ ] Completed [ ] In Progress [ ] Not Started

The facility has a system to monitor for, and internally review, development of respiratory infections among residents and healthcare personnel in the facility. See CDC guidance on respiratory surveillance: [https://www.cdc.gov/longtermcare/pdfs/LTC-Resp-OutbreakResources-P.pdf](https://www.cdc.gov/longtermcare/pdfs/LTC-Resp-OutbreakResources-P.pdf).

[ ] Completed [ ] In Progress [ ] Not Started

The facility has infection control policies that outline the recommended Transmission-Based Precautions that should be used when caring for residents with respiratory infections.

[ ] Completed [ ] In Progress [ ] Not Started

The plan outlines a process for cohorting confirmed or suspected cases.

[ ] Completed [ ] In Progress [ ] Not Started

The facility reviews IPC guidance for healthcare facilities caring for residents with respiratory infections.

[ ] Completed [ ] In Progress [ ] Not Started
Facility Communications

A point of contact during respiratory illness outbreaks has been identified.

[ ] Completed [ ] In Progress [ ] Not Started

A person has been assigned responsibility for communications with public health authorities.

[ ] Completed [ ] In Progress [ ] Not Started

A person has been assigned responsibility for communications with staff, residents, and their families regarding the status and impact of an outbreak in the facility.

[ ] Completed [ ] In Progress [ ] Not Started

Contact information for family members or guardians of residents is up-to-date.

[ ] Completed [ ] In Progress [ ] Not Started

A list has been created of other healthcare entities and their points of contact with whom it may be necessary to maintain communication during an outbreak (other long-term care and residential facilities, emergency medical services, local and state health department).

[ ] Completed [ ] In Progress [ ] Not Started

The facility has materials prepared for posting if it is necessary to close the facility to the public and/or visitors. A public communication plan has been developed.

[ ] Completed [ ] In Progress [ ] Not Started

Supplies and Resources

Alcohol-based hand sanitizer is available in resident rooms, resident care areas, and common areas.

[ ] Completed [ ] In Progress [ ] Not Started

Sinks are stocked with soap and paper towels.

[ ] Completed [ ] In Progress [ ] Not Started

Signs are posted immediately outside of resident rooms indicating appropriate IPC precautions and necessary PPE.

[ ] Completed [ ] In Progress [ ] Not Started

Tissues and facemasks are available near entrances and common areas with no-touch receptacles for disposal.

[ ] Completed [ ] In Progress [ ] Not Started

The facility has an appropriate supply of facemasks, respirators (if available and the facility has a respiratory protection program with trained, medically cleared, and fit-tested HCP), gowns, gloves,
and eye protection. Staff training records for donning and doffing PPE are available.

[ ] Completed [ ] In Progress [ ] Not Started

**Occupational Health**

The facility has a sick leave policy that is non-punitive, flexible, and consistent with public health policies that allow ill healthcare personnel to stay home when sick.

[ ] Completed [ ] In Progress [ ] Not Started

Staff and personnel regularly monitor themselves for symptoms of illness and report symptoms to an immediate supervisor.

[ ] Completed [ ] In Progress [ ] Not Started

The facility has a plan for monitoring and assigning work restrictions for ill and/or exposed healthcare personnel (See: https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html).

[ ] Completed [ ] In Progress [ ] Not Started

**Education and Training**

The facility provides education and training to healthcare personnel, residents, and family members of residents to provide understanding and basic prevention and control measures for respiratory illnesses (including COVID-19 and pandemic influenza).

[ ] Completed [ ] In Progress [ ] Not Started

A person has been designated for coordination of education and training on respiratory illnesses; maintains a record of staff attendance.

[ ] Completed [ ] In Progress [ ] Not Started

Language and reading-level appropriate resources have been identified to supplement and support education and training programs to staff, residents, and family members, and are available to distribute if needed.

[ ] Completed [ ] In Progress [ ] Not Started

**Surge Capacity**

A contingency staffing plan is in place identifying minimum staffing requirements in the event of a surge.

[ ] Completed [ ] In Progress [ ] Not Started

A person has been assigned responsible for performing daily assessments of staffing status and needs during a surge.
The staffing plan includes strategies for collaborating with local and regional emergency preparedness and health organizations in the event of a crisis.

Estimates have been made of the quantities of essential medical equipment, supplies, resident care materials, and PPE that would be needed in the event of a surge/outbreak.

A strategy has been developed for how priorities would be made in the event there is a need to allocate equipment, pharmaceuticals, and other resources.

Plans for expanding morgue capacity has been discussed with local and regional planning contacts.

References