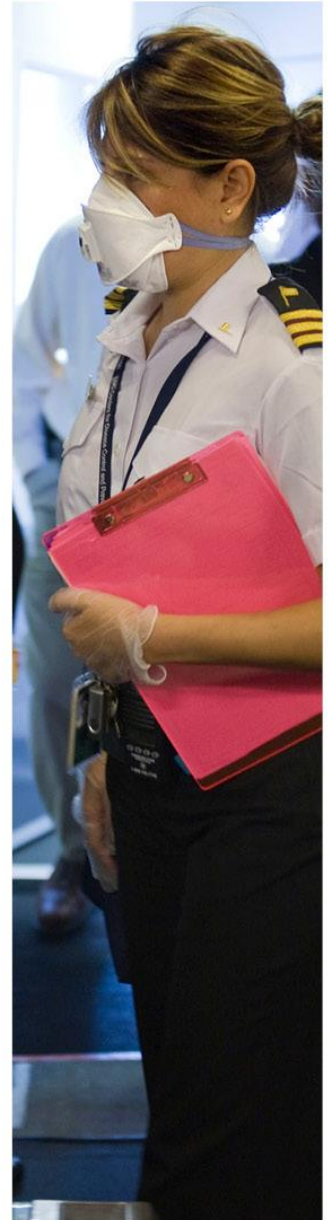# COMMUNITY ASSESSMENT TOOL
FOR PUBLIC HEALTH EMERGENCIES

Including Pandemic Influenza

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

Community Assessment Tool
for Public Health Emergencies

Including Pandemic Influenza

Prepared for:

The Centers for Disease Control and Prevention's Division of Healthcare Quality Promotion
Healthcare Preparedness Activity

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Community Assessment Tool for Public Health Emergencies Including Pandemic Influenza

General Instructions

Introduction/Purpose

The Community Assessment Tool (CAT) for Public Health Emergencies Including Pandemic Influenza (hereafter referred to as the CAT) was developed as a result of feedback received from several communities. These communities participated in workshops focused on influenza pandemic planning and response. The 2008 through 2011 workshops were sponsored by the Centers for Disease Control and Prevention (CDC).

Feedback during those workshops indicated the need for a tool that a community can use to assess its readiness for a disaster—readiness from a total healthcare perspective, not just hospitals, but the whole healthcare system[1]. The CAT intends to do just that—help strengthen existing preparedness plans by allowing the healthcare system and other agencies to work together during an influenza pandemic[2]. It helps reveal each core agency partners' (sectors) capabilities and resources, and highlights cases of the same vendors being used for resource supplies (e.g., personal protective equipment [PPE] and oxygen) by the partners (e.g., public health departments, clinics, or hospitals). The CAT also addresses gaps in the community's capabilities or potential shortages in resources.

This tool has been reviewed by a variety of key subject matter experts from federal, state, and local agencies and organizations. It also has been piloted with various communities that consist of different population sizes, to include large urban to small rural communities.

Applicability

While the purpose of the CAT is to further prepare the community for an influenza pandemic, its framework is an extension of the traditional all-hazards approach to planning and preparedness. As such, the information gathered by the tool is useful in preparation for most widespread public health emergencies.

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[1] A healthcare system is the complete network of agencies, facilities, and all providers of healthcare in a specified geographic area.

[2] A pandemic is a global disease outbreak. An influenza pandemic occurs when a new influenza virus emerges for which people have little or no immunity, and for which there may be no vaccine initially.

Intended Audience   This tool is primarily intended for use by those involved in healthcare emergency preparedness (e.g., community planners, community disaster preparedness coordinators, 9-1-1 directors, hospital emergency preparedness coordinators). It is divided into sections based on the core agency partners, which may be involved in the community's influenza pandemic influenza response. These core agency partners are:

- 9-1-1 Call Centers
- Other Call Centers
- Emergency Medical Services
- Primary Care Providers
- Hospital Systems
- Alternate Care Sites
- Mortuary Services
- Palliative Care/Hospice
- Outpatient/Walk-In Clinics

- Urgent Care Centers
- Public Health
- Home Health Care
- Long-Term Care
- Pharmacy
- Emergency Management
- Local Government
- Veterans Affairs Medical Center

CAT Design   The CAT provides individual sections for each of the core agency partners (sectors) identified above. Each of these sections―with the exception of Alternate Care Sites, Emergency Management, Local Government, and Veterans Affairs Medical Center―is divided into two parts.

Part 1 asks for general information about the agency partner. For example, in the Hospital Systems section, it asks questions about all hospital systems in the community. Part 1 is designed to be completed by an individual community planner or a disaster/emergency preparedness coordinator. The sections for Emergency Management, Local Government, and Veterans Affairs Medical Center have only Part 1 questions, because generally these core agency partners do not have separate components. With regard to Alternate Care Sites, most communities are in the conceptualization phase of alternate care and have not identified more than one site.

Part 2 (as applicable) asks specific questions about the components of the agency partner (sector). In the example given above about the Hospital Systems section, Part 1 asks questions about the community's overall hospital system, whereas Part 2 asks questions about each individual hospital. Therefore, these Part 2 questions need to be answered by people who are the most knowledgeable about these individual hospitals—most likely people representing the individual agencies. Part 2 questions are organized according to like groupings as much as possible.

Both Part 1 and Part 2 questions can be customized by community planners. Questions may be edited, added, or deleted as necessary to obtain desired information about the healthcare partners' capabilities, capacities, and resources within the community. Some questions are marked with an asterisk (*) indicating priority questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first.

How to Use This Tool   To use the CAT, follow these three steps:

1. **Appoint a CAT Coordinator** – This person has overall responsibility for the oversight and management of the completion of all sections of the CAT. Responsibilities of this coordinator are to:

    a. Review each section of the CAT.

    b. Identify individuals to complete the applicable sections for each core agency partner (sector) and solicit their feedback on these parts.

    c. Keep track of the progress on completing the sections.

    NOTE: It may be helpful to appoint an assistant to help with oversight and management of completion of all sections of the CAT.

2. **Identify individuals who will complete specific sections of the CAT** – After the CAT Coordinator identifies individuals to complete both Part 1 and Part 2 sections for each core agency partner (sector), he/she contacts these individuals by phone, mail, or e-mail to ask for their participation for feedback on these parts. At the same time, the coordinator explains the purpose of the CAT, the importance of higher level questions marked with an asterisk, and how the answers will be used. Additionally, it will be important to assure them that confidential information is protected.

The coordinator clearly states who they should contact with questions or comments (e.g., the coordinator or assistant, if one is used) and where to return the completed section(s). Also, these individuals are provided with a reasonable timeline for completing their section(s).

3. **Keep track of progress** – The title page to each section in the CAT provides three check boxes that can be used to keep track of progress:

   a. Complete – This box is checked when both parts of the section have been completed.

   b. To Be Determined – This box is checked if the section is incomplete and has questions that will be answered at a later date.

      Not Applicable – This box is checked if the core agency partner (sector) does not exist in the community.

What to Do with the Collected Information

Upon completion of the CAT, a thorough review of the collected information needs to be conducted. The purpose of this review is to identify issues such as a scenario in which several healthcare facilities are relying on the same vendor(s) for supplies, such as PPE and oxygen, or other issues, such as:

- Partners who can share limited equipment and supplies

- Partners who may need help improving their plan for responding to large events

- Current employee numbers and how they may change in an influenza pandemic

- Communication between partners, which may need to be improved

Once completed, this tool should assist communities in becoming better prepared for an influenza pandemic or other public health emergency and, thus, greatly reduce its potential impact.

Periodic Updates

As with any other preparedness tool, to maintain the preparedness level already attained, this will need to be updated periodically. The update should include a follow up on items that need to be completed from this initial review.

Sector A
9-1-1 CALL CENTERS

☐ Complete

☐ To Be Determined

☐ Not Applicable

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the community's 9-1-1 call center system. Questions about each individual public safety answering point (PSAP) will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Please describe the community's 9-1-1 system. [check all that apply]

   ☐ Basic 9-1-1[1]

   ☐ Enhanced 9-1-1 (E 9-1-1)[2]

   ☐ Next Generation 9-1-1 (NG 9-1-1)[3]

   ☐ None of the above

2. How many PSAP(s) take emergency calls in the community?

   _____

3. How many PSAP(s) dispatch first responders, for example, law enforcement, fire, Emergency Medical Services (EMS), in the community?

   _____

4. What is the average number of calls the 9-1-1 system receives each day?

   _____

5. What is the average number of 9-1-1 calls during a busy hour?

   _____

---

[1] Basic 9-1-1 allows a call to be made to 9-1-1 but does not transmit the caller's phone number and location with the call.

[2] Enhanced 9-1-1 transmits the caller's phone number and location with the call.

[3] Next Generation 9-1-1 is not "official" yet and is being tested in several areas of the country. It takes into account interfacing more with wireless calls, Voice over Internet Protocol (VoIP) calls, video conferencing, texting, e-mail, and other emerging technologies.

6. What is the average number of non-emergency and unintentional/accidental calls received by 9-1-1 each day?

_____ _____

7. Does the 9-1-1 system reroute non-emergency and unintentional/accidental calls?

☐ Yes

☐ No

Please describe. _____ _____

8. How many calls can be held in the queue during a disaster or busy hour?

_____ _____

9. How many calls each hour may not reach the PSAP if the network is overloaded during a disaster or busy hour?

_____ _____

10. * Does the 9-1-1 system have a disaster recovery plan that includes an influenza pandemic?

☐ Yes

☐ No

11. * Does the 9-1-1 system have a continuity of operations plan (COOP) that includes an influenza pandemic?

☐ Yes

☐ No

12. Does the 9-1-1 system electronically record specific symptoms?

☐ Yes

☐ No

13. * Is the 9-1-1 system's influenza pandemic plan coordinated with the community's Emergency Medical Services (EMS)?

☐ Yes

☐ No

14. Are all requests for EMS dispatched by the 9-1-1 system?

☐ Yes

☐ No

15. * Does the community's influenza pandemic plan identify the specific roles(s) of the 9-1-1 system?

☐ Yes

☐ No

16. * Does the community's influenza pandemic plan include using the 9-1-1 system to watch for and detect an influenza pandemic?

☐ Yes

☐ No

* If yes, are there policies and/or procedures for <u>collecting</u> symptoms and other possible signs of an influenza pandemic?

☐ Yes

☐ No

* If yes, are there policies and/or procedures for <u>reporting</u> symptoms and other possible signs of an influenza pandemic?

☐ Yes

☐ No

* Does the community's influenza pandemic plan address and define a surge in calls to the 9-1-1 system?

☐ Yes

☐ No

If yes, please describe. _____

17.   ✳ Does the 9-1-1 system have a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

    ☐ Yes

    ☐ No

18.   ✳ Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

    ☐ Yes

    ☐ No

19.   Does the 9-1-1 system receive the HAN?

    ☐ Yes

    ☐ No

20.   ✳ Is there a mechanism in place for the timely coordination and update of information and protocols on an ongoing basis?

    ☐ Yes

    ☐ No

21.   Does the 9-1-1 system have a designated Public Information Officer (PIO)?

    ☐ Yes

    ☐ No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the 9-1-1 system?

    ☐ Yes

    ☐ No

22.   ✳ Does the community's influenza pandemic plan address policies and procedures and legal protections for sharing pertinent data with local and state public health authorities?

    ☐ Yes

    ☐ No

23. ***** Does the community's pandemic influenza plan define isolation and quarantine policies and procedures for the 9-1-1 system?

☐ Yes

☐ No

24. ***** Does the community's pandemic influenza plan identify mechanisms for freedom of movement of 9-1-1 system personnel?

☐ Yes

☐ No

25. ***** Does the community's pandemic influenza plan define processes for vaccinating 9-1-1 system personnel as an element of the critical infrastructure?

☐ Yes

☐ No

26. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector A
9-1-1 Call Centers
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about <u>each</u> public service answering point (PSAP) in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Name or location of PSAP _____

2. What is the population size of the area the PSAP covers (i.e., the service area)?

   _____

3. On average, how many calls does the PSAP handle each day?

   _____

4. How many calls does the PSAP handle during an average busy hour?

   _____

5. On average, how quickly are calls answered?

   _____

6. On average, how long does a typical call last?

   _____

7. On average, how many non-emergency and unintentional/accidental calls does the PSAP get each day?

   _____

8. Does the PSAP reroute non-emergency and unintentional/accidental calls?

   ☐ Yes

   ☐ No

   If yes, please describe. _____

9. Does the PSAP normally take calls from other communities?

☐ Yes

☐ No

If yes, what percent of daily calls are from other communities?

_____

10. How many calls can be held in the queue during a disaster or busy hour?

_____

11. How many calls per hour may not reach the PSAP if the network is overloaded during a disaster or busy hour?

_____

12. How long is the average shift?

_____

13. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, please describe. _____

14. * Is there pre-established alternative or emergency work schedules for situations when the PSAP has fewer employees?

☐ Yes

☐ No

15. Is there a family support system for PSAP employees (e.g., an Employee Assistance Program)?

☐ Yes

☐ No

16.   * Will the PSAP work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐   Yes

☐   No

If yes, please describe. _____

17.   * Is there a plan to quickly train call-takers (e.g., just-in-time training) on how to give current and accurate information to the public?

☐   Yes

☐   No

If yes, please describe. _____

18.   Is there an identified resource to inform callers about how to prevent catching or spreading the influenza virus?

☐   Yes

☐   No

If yes, please describe. _____

19.   * Is there a policy to refer callers to a nurse advice line or physician's office, if they do not need Emergency Medical Services (EMS)?

☐   Yes

☐   No

If yes, please describe. _____

20.   * Is there a PSAP disaster recovery plan that includes an influenza pandemic?

☐   Yes

☐   No

21. * Is there a PSAP continuity of operations plan (COOP) that includes an influenza pandemic?

    ☐ Yes

    ☐ No

22. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector B

OTHER CALL CENTERS

☐ Complete

☐ To Be Determined

☐ Not Applicable

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the community's <u>non-emergency call centers</u>. Questions about each individual public safety answering point (PSAP) will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Are any of the following call centers serving the community?

    A. 2-1-1 Call Center[1]

        ☐   Yes

        ☐   No

        *   If yes, what role does 2-1-1 have in the community's current pandemic influenza plan?

        _____

    B. 3-1-1 Call Center[2]

        ☐   Yes

        ☐   No

        *   If yes, what role does 3-1-1 have in the community's current pandemic influenza plan?

        _____

---

[1]   2-1-1 is a health and human services information referral line operated by United Way the Alliance of Information and Referral Systems' (AIRS') members.

[2]   3-1-1 is a municipal services and information line that allows city residents to obtain important non-emergency information services through a central, all-purpose phone number. 3-1-1 is not available in all communities.

C. 7-1-1 Call Center[3]

☐   Yes

☐   No

* If yes, what role does 7-1-1 have in the community's current pandemic influenza plan?

_____

D. Poison Center (PC)[4]

☐   Yes

☐   No

* If yes, what role does the PC have in the community's current pandemic influenza plan?

_____

E. Non-Profit Community Care (NPCC) Lines[5]

☐   Yes

☐   No

If yes, how many NPCC Lines does the community have?

_____

* What role do these lines have in the community's current pandemic influenza plan?

_____

---

[3] 7-1-1 is a line dedicated to hearing or speech impaired persons.

[4] Poison Centers (also known as Poison Control Centers) are staffed by physicians, nurses, pharmacists, and paramedics who respond to poison related questions.

[5] Non-Profit Community Care Lines provided by community non-profit organizations or agencies.

F. Veterans Health Affairs (VHA) Call Centers[6]

☐   Yes

☐   No

*   If yes, what roles do the VHA Call Centers have in the community's current pandemic influenza plan?

_____

G. Public Health Call Lines[7]

☐   Yes

☐   No

If yes, how many Public Health Call Lines does the community have?

_____

*   What role do these lines have in the community's current pandemic influenza plan?

_____

H. Nurse Advice Lines/Private Telephone Triage Groups[8]

☐   Yes

☐   No

If yes, how many Nurse Advice Lines/Private Telephone Triage Groups does the community have?

_____

*   What role do these lines have in the community's current pandemic influenza plan?

_____

---

[6] Veterans Health Affairs Call Centers manage calls for assistance or information from veterans and their families.

[7] Public Health Call Lines provide information on health related topics. During an emergency situation, a Public Health Hotline may be activated.

[8] Nurse Advice Lines/Private Telephone Triage Groups are staffed by licensed healthcare professionals who help the caller determine the nature and urgency of their problem and direct them to the appropriate level of care.

I. Insurance Industry Call Centers[9]

☐   Yes

☐   No

If yes, how many Insurance Industry Call Centers does the community have?

_____

* What role do these lines have in the community's current pandemic influenza plan?

_____

J. Other health related call centers[10]

☐   Yes

☐   No

* If yes, what are these other call centers and their roles in the community's current pandemic influenza plan?

_____

2. Answer these questions for each non-emergency call center (identified in Question #1 above) in the community.

A. Are non-emergency calls answered for the 9-1-1 system?

☐   Yes

☐   No

If yes, please describe this process.

_____

---

[9]   Insurance Industry Call Centers answer questions and provide information for the subscribers to a specific private insurance company.

[10] Other health related call centers include any categories not previously mentioned.

B. Are there physician directives for where to direct callers with influenza-like illness symptoms?

☐ Yes

☐ No

If yes, what are some of these directives?

_____

C. * Is there a plan to establish a toll free number for pre-recorded messages to the public?

☐ Yes

☐ No

D. * Is there a plan for when there is a higher call volume and fewer employees?

☐ Yes

☐ No

E. * Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

☐ Yes

☐ No

F. * Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

☐ Yes

☐ No

G. Does the call center receive the HAN?

☐ Yes

☐ No

H. Does the call center have a designated Public Information Officer (PIO)?

☐ Yes

☐ No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the call center?

☐ Yes

☐ No

I. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____
_____
_____

Sector B
Other Call Centers
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) from the various call centers within this sector. The person(s) completing Part 2 should answer only those questions that pertain to the applicable call center they represent in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. **2-1-1 Call Center**

   A. What is the population size of the area this call center covers (i.e., the service area)?

   _____

   B. On average, how many calls does this call center handle each day?

   _____

   C. How long is the average shift?

   _____

   D. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

   ☐ Yes

   ☐ No

   If yes, please describe.

   _____

   E. Does this call center use volunteers?

   ☐ Yes

   ☐ No

F. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐ Yes

☐ No

If yes, please describe.

_____

G. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

H. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

I. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

J. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

K. Does 2-1-1 routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

2. **3-1-1 Call Center**

A. What is the population size of the area this call center covers (i.e., the service area)?

_____

B. On average, how many calls does this call center handle each day?

_____

C. How long is the average shift?

_____

D. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, please describe.

_____

E. Does this call center use volunteers?

☐ Yes

☐ No

F. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐ Yes

☐ No

If yes, please describe.

_____

G. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

H. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

I. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

J. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

K. Does 3-1-1 routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

3. **7-1-1 Call Center**

   A. What is the population size of the area this call center covers (i.e., the service area)?

   _____

   B. On average, how many calls does this call center handle each day?

   _____

   C. How long is the average shift?

   _____

   D. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

   ☐ Yes

   ☐ No

   If yes, please describe.

   _____

   E. Does this call center use volunteers?

   ☐ Yes

   ☐ No

   F. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

   ☐ Yes

   ☐ No

   If yes, please describe.

   _____

G. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

H. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

I. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

J. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

K. Does 7-1-1 routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

4. **Poison Center (PC)**

    A. Is this PC: [check all that apply]

    ☐   Hospital-based

    ☐   University-based

    ☐   Private entity

    ☐   Public entity

    B. What is the population size of the area this call center covers (i.e., the service area)?

    _____

    C. On average, how many calls does this call center handle each day?

    _____

    D. How long is the average shift?

    _____

    E. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

    ☐   Yes

    ☐   No

    If yes, please describe.

    _____

    F. Does this PC use volunteers?

    ☐   Yes

    ☐   No

G. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐ Yes

☐ No

If yes, please describe.

_____

H. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

I. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

J. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

K. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

L. Does the PC routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

5. **Non-Profit Community Care (NPCC) Lines**

A. What is the population size of the area these call centers cover (i.e., the service area)?

_____

B. On average, how many calls do these call centers handle each day?

_____

C. Please list some of the larger NPCC Lines in the area.

_____

D. Do these NPCC Lines use volunteers?

☐ Yes

☐ No

E. * Do these NPCC Lines have disaster recovery plans?

☐ Yes

☐ No

F. * Do these NPCC Lines have a continuity of operations plan (COOP)?

☐ Yes

☐ No

G. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

H. Do these NPCC Lines routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

6. **VHA Call Centers**

A. What is the population size of the area this call center covers (i.e., the service area)?

_____

B. On average, how many calls does this call center handle each day?

_____

C. How long is the average shift?

_____

D. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, please describe.

_____

E. Does this call center use volunteers?

☐ Yes

☐ No

F. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐ Yes

☐ No

If yes, please describe.

_____

G. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

H. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

I. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

J. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

K. Does the VHA Call Center routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐   Yes

☐   No

7. **Public Health Call Line**

A. What is the population size of the area this call center covers (i.e., the service area)?

_____

B. On average, how many calls does this call center handle each day?

_____

C. Does this line have a toll-free number for a "flu" information line?

☐   Yes

☐   No

If yes, please describe the information that will be available from the "flu" Line.

_____

D. How long is the average shift?

_____

E. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐   Yes

☐   No

If yes, please describe.

_____

F. Does this call center use volunteers?

☐   Yes

☐   No

G. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐ Yes

☐ No

If yes, please describe.

_____

H. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

I. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

J. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

K. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

L. Does this Public Health Call Line routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

8. **Nurse Advice Line and/or Private Telephone Triage Group Call Center**

A. What is the population size of the area this call center covers (i.e., the service area)?

_____

B. On average, how many calls does this call center handle each day?

_____

C. How long is the average shift?

_____

D. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, please describe.

_____

E. Does this call center use volunteers?

☐ Yes

☐ No

F. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐ Yes

☐ No

If yes, please describe.

_____

G. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

H. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

I. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

J. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

K. Are most of the Nurse Advice Lines associated with a hospital?

☐ Yes

☐ No

L. Do any Nurse Advice Lines have nurses answering phones from their own homes (i.e., remote operating service)?

☐ Yes

☐ No

M. Do Nurse Advice Lines routinely redirect callers to 9-1-1 when its lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

9. **Insurance Industry Call Centers**

A. What is the population size of the area this call center covers (i.e., the service area)?

_____

B. On average, how many calls does this call center handle each day?

_____

C. How long is the average shift?

_____

D. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, please describe.

_____

E. Do these call centers routinely redirect callers to 9-1-1 when the lines no longer have the capacity or capability to answer calls?

☐ Yes

☐ No

F. Does this call center use volunteers?

☐ Yes

☐ No

G. * Is there a plan to work with other call centers in the community to share employees or take extra calls during an influenza pandemic?

☐ Yes

☐ No

If yes, please describe.

_____

H. Is there an identified resource for informing callers about how to prevent catching or spreading the influenza virus?

☐ Yes

☐ No

If yes, please describe.

_____

I. * Does this call center have a disaster recovery plan?

☐ Yes

☐ No

J. * Does this call center have a continuity of operations plan (COOP)?

☐ Yes

☐ No

K. * In the event of communication failures, is there a plan to provide personnel lists (e.g., backline) to public safety answering points (PSAPs) for continuity of operations?

☐ Yes

☐ No

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Sector C

EMERGENCY MEDICAL SERVICES

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector C
Emergency Medical Services
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the Emergency Medical Services (EMS) agencies in the community. Questions about each individual EMS agency will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many EMS agencies are in the community?

   _____

2. Please list the name of each EMS agency in the community.

   _____

3. What is the overall capacity of the community's EMS?

   Please describe (e.g., number of ambulances and employees).

   _____

4. * In plans for using alternative resources to reduce the demand on EMS, with whom is coordination made [check all that apply]?

   A. 9-1-1 call centers/public safety answering points (PSAPs)

   ☐ Yes

   ☐ No

   B. Other call centers

   ☐ Yes

   ☐ No

   C. Local public health departments

   ☐ Yes

   ☐ No

D. Hospitals

☐ Yes

☐ No

E. Hospital emergency departments (EDs)

☐ Yes

☐ No

F. Other (describe)

_____

5. * Have strategies been identified for protecting the EMS workforce and their families during an influenza pandemic?

☐ Yes

☐ No

6. Has there been a discussion of the role EMS can serve in "treating and releasing" patients without transporting them to a healthcare facility during an influenza pandemic?

☐ Yes

☐ No

7. Has there been a discussion of the role EMS can serve in providing antiviral treatment and prophylaxis to patients during an influenza pandemic?

☐ Yes

☐ No

8. * Has there been a discussion of the backup plans to augment the EMS workforce during an influenza pandemic, such as alternate employee configurations and programs to rapidly recruit, train, and license new EMS personnel?

☐ Yes

☐ No

9. Please list the community partners EMS is currently working with regarding pandemic influenza planning efforts.

_____

_____

Sector C
Emergency Medical Services
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about <u>each</u> of the Emergency Medical Services (EMS) agencies in the community. If there is more than one, fill out this section for each. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many ambulances and other medical transport vehicles are available to transport patients?

   _____

2. How many non-transport EMS vehicles are available in the community?

   _____

3. On average, how many patients in the community are transported by EMS every day?

   _____

4. What is the maximum number of patients who can be transported at one time using all of the patient transport vehicles?

   _____

5. * Are there plans to use vehicles from other organizations (e.g., churches)?

   ☐ Yes

   ☐ No

6. How long is the average shift?

   _____

7. * Is there a plan to increase the staff if 30% are ill and cannot come to work?

    ☐   Yes

    ☐   No

If yes, please describe.

_____

8. Have pre-established, alternative or emergency work schedules been developed for situations when there are fewer employees?

    ☐   Yes

    ☐   No

9. Describe the process for keeping track of employees who are ill and cannot come to work?

_____

10. Is there a process to track employees who have been exposed (without wearing personal protective equipment [PPE]) to ill patients, ill employees, or both?

    ☐   Yes

    ☐   No

If yes, please describe the process of tracking these employees.

_____

11. Are basic infection control requirements (e.g., gloves, masks, and hand sanitizers) in place for employees?

    ☐   Yes

    ☐   No

12. Is there enough personal protective equipment[1] (PPE) for employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

    ☐   Yes

    ☐   No

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

13. Does EMS stockpile antiviral medications or antibiotics?

☐ Yes

☐ No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

14. Is there a process in place to provide antiviral medications to employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

15. * Is there a plan and resources to provide employees with "just-in-time" training for new clinical standards and treatment protocols during an influenza pandemic?

☐ Yes

☐ No

16. Is there a process in place to track patients with influenza-like illness?

☐ Yes

☐ No

If yes, please describe the process of tracking patients.

_____

17.   ***** Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

     ☐ Yes

     ☐ No

18.   ***** Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

     ☐ Yes

     ☐ No

19.   Has a Public Information Officer (PIO) been designated?

     ☐ Yes

     ☐ No

    If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for EMS?

     ☐ Yes

     ☐ No

20.   ***** Is there a plan in place to ensure the EMS Medical Director has oversight of the EMS agency's response to an influenza pandemic?

     ☐ Yes

     ☐ No

21.   Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector D
PRIMARY CARE PROVIDERS
Adults and Pediatrics

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector D
Primary Care Providers
Adults and Pediatrics
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the primary care providers in the community. Questions about each individual primary care provider practice will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many primary care offices are in the community?

    _____   General

    _____   Pediatric

2. How many large offices (five or more physicians) are in the community?

    _____   General

    _____   Pediatric

3. How many private physicians or clinicians are in the community?

    _____   General

    _____   Pediatric

4. What role will private physicians/clinicians play during an influenza pandemic?

    _____

5. List the offices that see the most patients every day in the community. Please include their specialties.

    _____

6. Does the pandemic or "all-hazard" task force in the community include physicians or their designees from all types of specialties?

   ☐ Yes

   ☐ No

   If yes, list specialties.

   _____

7. Can any of the clinics in the area be designated as an alternate care site (ACS)?

   ☐ Yes

   ☐ No

8. * Has work been done with these clinics to develop an ACS plan?

   ☐ Yes

   ☐ No

   If yes, please list how many clinics are involved, where they are located, and what type of care they will provide.

   _____

9. During an influenza pandemic, will there be a change in the type of patients who will be treated by primary care providers in order to decrease the large number of patients who can overwhelm the hospitals?

   ☐ Yes

   ☐ No

   If yes, please describe.

   _____

10. Will there be a change in the type of treatment for patients who will be seen by primary care providers?

☐ Yes

☐ No

If yes, please describe.

_____

11. * Has work been done with the clinics to address appropriate standards of care when resources are scarce?

☐ Yes

☐ No

If yes, please explain.

_____

Sector D
Primary Care Providers
Adults and Pediatrics
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each primary care provider in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Practice Name _____

    Specialty _____

2. What is the role of the primary care practice in the community's pandemic influenza planning?

    _____

3. On average, how many patients are seen every day in the office?

    _____

4. How many of the physicians also practice at the local hospital(s)?

    _____

5. Has it been determined how the physicians will provide care during an influenza pandemic? For example, will they split their time between a hospital and their practice?

    ☐ Yes

    ☐ No

    If yes, please describe how these physicians will provide care.

    _____

6. ***** Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, how would staff be increased? [check all that apply]

☐ Use Local Registry (agency)

☐ Extend shift length (e.g., from 8 to 12 hours)

☐ Increase nurse-to-patient ratios

☐ Reassign employees

☐ Other (describe) _____

7. ***** Is there a plan to use retired physicians to increase the staff during an influenza pandemic?

☐ Yes

☐ No

8. ***** Is there a plan to use retired nurses to increase the staff during an influenza pandemic?

☐ Yes

☐ No

9. Will the primary care practice require the triaging of patients in order to decrease the large number of patients who can overwhelm the hospitals?

☐ Yes

☐ No

10. Have separate waiting areas been identified for patients with influenza-like illness symptoms?

☐ Yes

☐ No

11. Is there enough personal protective equipment[1] (PPE) available for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

12. Does the primary care practice stockpile antiviral medications or antibiotics?

☐ Yes

☐ No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

13. * Is there a plan to enhance employee and patient security by:

A. Increasing an existing security force?

☐ Yes

☐ No

B. Using community law enforcement assets for crowd control, traffic flow, or guarding patients brought in from local jails or prisons?

☐ Yes

☐ No

14. * Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

☐ Yes

☐ No

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

15.   * Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

☐   Yes

☐   No

16. Does the primary care practice have a designated Public Information Officer (PIO)?

☐   Yes

☐   No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the practice?

☐   Yes

☐   No

17. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector E HOSPITAL SYSTEMS

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector E

Hospital Systems

Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the hospital systems in the community. If there is more than one, fill out this section for each. Questions about each hospital in the system will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many hospital systems are in the community?

    _____ General

    _____ Pediatric

2. How many total hospitals are in the community?

    _____ General

    _____ Pediatric

3. Please list the hospitals in the community that would treat influenza patients and then check the appropriate box for Part 2.

    Hospital Name _____

    ☐ Part 2 completed

    ☐ Part 2 not completed

    Hospital Name _____

    ☐ Part 2 completed

    ☐ Part 2 not completed

    Hospital Name _____

    ☐ Part 2 completed

    ☐ Part 2 not completed

Hospital Name _____

☐ Part 2 completed

☐ Part 2 not completed

Hospital Name _____

☐ Part 2 completed

☐ Part 2 not completed

Hospital Name _____

☐ Part 2 completed

☐ Part 2 not completed

Hospital Name _____

☐ Part 2 completed

☐ Part 2 not completed

4. Do any of the hospitals that completed Part 2 have the same:

A. Vendors or suppliers of critical resources (e.g., ventilators and oxygen)?

☐ Yes

☐ No

B. Places for alternate care sites?

☐ Yes

☐ No

C. * Memoranda of understanding (MOUs), memoranda of agreement (MOAs), or mutual aid agreements (MAAs) with the same vendors?

☐ Yes

☐ No

D. Sources for temporary employees and volunteers?

☐ Yes

☐ No

Sector E
Hospital Systems
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each hospital in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Hospital Name _____

2. Hospital System (if applicable) _____

3. How many hospitals are in the hospital system (if applicable)? _____

4. What is the certification level in the hospital trauma center, based on the American College of Surgeons?

   ☐ Level I

   ☐ Level II

   ☐ Level III

   ☐ Level IV

   ☐ State certified, but not American College of Surgeons certified

   ☐ Not trauma certified

5. Does the hospital have airborne infection isolation rooms (AIIRs) in the hospital emergency department (ED)?

   ☐ Yes

   ☐ No

   If yes, how many are certified?

   _____

6. Does the hospital have positive-pressure rooms in the Emergency Department (ED) for immune-suppressed patients (e.g., bone marrow transplant patients or others who are severely immune-suppressed)?

☐   Yes

☐   No

If yes, how many are certified?

_____

How many are currently usable:

	AIIR	Positive Pressure
Instantly?	_____	_____
Within 12 hours?	_____	_____
Within 24 hours?	_____	_____

7. On average, how many patients are admitted to the ED each day?

_____

8. On average, how many patients are admitted to hospital AIIRs each day through the ED?

_____

9. On average, how many patients are admitted to hospital positive-pressure rooms each day through the ED?

_____

10. On a daily basis, what percentage of the staffing level is attained? _____%

11. How often is there a need to supplement employees?

☐   Daily

☐   Weekly

☐   Monthly

12. Which departments are under staffed with nurses?

☐   General Medical

☐   Pediatrics

☐   Surgery (post-surgical care)

☐   Intensive Care Unit (ICU)

☐   ED

13. *Is there a plan to increase the staff if 30% are ill and cannot come to work?

☐   Yes

☐   No

If yes, how would staff be increased? [check all that apply]

☐   Use Local Registry (agency)

☐   Extend shift length (e.g., from 8 to 12 hours)

☐   Increase nurse-to-patient ratios

☐   Reassign employees

☐   Other (describe) _____

14. *Describe the plan to adjust the caregiver to patient ratio staffing pattern with a surge of 30% to 50% more patients above the baseline level?

For the ED: _____

For CCU: _____

For Medical-Surgical floors: _____

15. * Describe the plan to adjust the caregiver to patient ratio staffing pattern with a surge of 50% to 100% more patients above the baseline level?

For the ED: _____

For CCU: _____

For Medical-Surgical floors: _____

16. * Is there a plan to allow credentialed employees from other facilities or hospitals to work in the hospital?

☐ Yes

☐ No

17. * Does the hospital pandemic plan address ways to increase operational (staffed) bed capacity?

☐ Yes

☐ No

18. If yes, check which hospital units will be used?

☐ General Medical

☐ Pediatrics

☐ Surgery (post-surgical care)

☐ ICU

19. How many times a month (by shift) is the ED at full or partial diversion?

	Full	Partial
Day	_____	_____
Evening	_____	_____
Night	_____	_____

20. * Is there a plan for the type of essential healthcare services to be provided, and how they will be prioritized during an influenza pandemic?

☐ Yes

☐ No

If yes, please list these essential healthcare services

_____

21. * Is there a plan to cancel elective surgeries?

☐ Yes

☐ No

22. * Is there a plan to cancel other services as well?

☐ Yes

☐ No

If yes, which ones will be cancelled?

_____

23. * Is there a plan for early discharge of patients during an influenza pandemic?

☐ Yes

☐ No

24. ***** Has a memoranda of agreement (MOA) been completed with extended or specialty care centers to care for patients discharged early from the hospital during an influenza pandemic?

☐ Yes

☐ No

Ventilators

25. How many working full-feature ventilators does the hospital have?

_____

26. How many ventilators are available from any of the community's long-term care, rehabilitation, or satellite clinics?

Full-Feature _____

Emergency _____

27. Does the hospital have access to rental or loaned ventilators on an emergency basis?

☐ Yes

☐ No

a. How long does it take to get these additional ventilators?

_____

b. How many additional ventilators can be obtained within four hours?

Full-Feature _____

Emergency _____

c. How many additional ventilators can be obtained within eight hours?

Full-Feature _____

Emergency _____

28. Do other hospitals in the community use the same ventilator vendor(s) as this hospital?

☐ Yes

☐ No

29. Please list the name(s) of the ventilator vendor(s).

_____

30. Would these vendor(s) have a problem meeting an increased demand for ventilators during an influenza pandemic?

☐ Yes

☐ No

31. What vendor(s) supplies oxygen to the hospital?

_____

32. Would this vendor(s) have a problem meeting increased demand during an influenza pandemic?

☐ Yes

☐ No

Standard of Care

33. * Are algorithms or protocols in place for <u>withdrawing care</u> from patients who have a questionable chance of survival in order to preserve scarce resources?

☐ Yes

☐ No

34. * Are algorithms or protocols in place for <u>withholding care</u> from patients who have a questionable chance of survival in order to preserve scarce resources?

☐ Yes

☐ No

Pharmaceuticals

35.   Does the hospital stockpile antiviral medications or antibiotics?

☐   Yes

☐   No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

*Plans

36.   * Does the hospital's emergency operations plan address:

A.   Mental health services (e.g., Critical Incident Stress Management [CISM]) to care for emergency staff, victims, and others in the community who may need special help coping with the effects of an influenza pandemic?

☐   Yes

☐   No

B.   Mass immunization/prophylaxis?

☐   Yes

☐   No

C. Mass fatality management?

☐ Yes

☐ No

If yes, does the plan address the following:

1. Provisions to provide proper examination and disposition of bodies?

   ☐ Yes

   ☐ No

2. Ways to increase morgue staffing and capacity?

   ☐ Yes

   ☐ No

3. What is the backup procedure if the morgue is over capacity?

   _____

D. Environmental surety (ensuring the protection of water and food, supplies, plans and procedures to restore facilities, and criteria for re-occupancy)?

☐ Yes

☐ No

E. Personal protective equipment (PPE) (e.g., gowns, gloves, N95 respirators, surgical masks, hand sanitizers) for employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

F. Availability of adequate supplies[1] (including food, linens, and patient care items) from suppliers that can be obtained in a timely manner to be self-sufficient for a 96-hour period?

☐ Yes

☐ No

G. Access to cots, sheets, blankets, and pillows?

☐ Yes

☐ No

H. Triage of mass illnesses that include priority of care or different levels of severity?

☐ Yes

☐ No

I. Enhanced hospital security by:

1. Increasing existing hospital security employees?

☐ Yes

☐ No

2. Using community law enforcement assets for crowd control, traffic flow, or guarding patients brought in from local jails or prisons for treatment?

☐ Yes

☐ No

3. Using a private security company(ies)?

☐ Yes

☐ No

If yes, please list the name(s) of the security company(ies).

_____

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate supplies." It is up to the individual planner or sector representative to determine what is adequate.

4. Do other hospitals in the area use the same security company(ies)?

☐ Yes

☐ No

J. Tracking expenses incurred during an emergency?

☐ Yes

☐ No

K. Pet sheltering to assist employees?

☐ Yes

☐ No

L. Eldercare or childcare to assist employees?

☐ Yes

☐ No

M. Coordination with state or local public health authorities?

☐ Yes

☐ No

N. Expansion of AIIRs?

☐ Yes

☐ No

37. * Does the hospital have an internal health surveillance system?

☐ Yes

☐ No

If yes, what does the system track? [check all that apply]

☐ ED visits

☐ Hospital admissions (numbers and patterns)

☐ Patient monitoring for influenza-like illness (ILI)

☐ Employee monitoring for ILI

☐ Healthcare workers' exposures to ILI

A. How is this information collected?

_____

B. When is this information gathered?

_____

C. How often is this information gathered?

_____

D. Who gathers this information?

_____

E. Whom and how (e.g., phone or fax) does the ED notify of unusual clusters of illnesses?

_____

F. Can these people be notified 24 hours per day?

☐ Yes

☐ No

38.   *Have separate waiting areas been identified for patients with ILI symptoms?

    ☐ Yes

    ☐ No

39.   *Is there a plan to address communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

    ☐ Yes

    ☐ No

40.   *Does the hospital plan address the disposition of the "worried well" and the "not so sick" in areas other than the ED?

    ☐ Yes

    ☐ No

If yes, describe.

_____

41.   *Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

    ☐ Yes

    ☐ No

42.   *Does the hospital have a designated Public Information Officer (PIO)?

    ☐ Yes

    ☐ No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the hospital?

    ☐ Yes

    ☐ No

43. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector F
ALTERNATE CARE SITES

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector F
Alternate Care Sites

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions <u>about each</u> alternate care site[1] (ACS) the community has identified (i.e., fill out this section for each ACS). Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

NOTE: There is not a Part 2 for this sector.

1. * Does the community's pandemic influenza plan include this ACS?

   ☐ Yes

   ☐ No

   If yes, describe the location of this site and the kind or level of care it will offer (e.g., non-acute care, critical care, and isolation/quarantine).

   _____

2. * Please list all community partners who were involved in this planning process for this ACS.

   _____

---

[1] The establishment of a site with a suitable facility that may be used to provide delivery of ambulatory or chronic care; offload less ill patients from nearby hospitals, thereby increasing the hospitals' surge capacity; provide primary patient care at a standard appropriate for the austere situation; provide quarantine, sequestration, or cohorting of "exposed" patients; and provide palliative care. Examples of an ACS are a primary triage point, a community-focused ambulatory care clinic, and a low-acuity patient care site.

(Source: AHRQ Publication No. 07-0001, February 2007)

3. Does this site have access to:

Beds or cots	Pharmaceuticals	Computer access
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Supplemental oxygen	Toilets	Hand washing areas
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Running water	Supplies	Electricity
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Bath/showers	Food and drink	Backup generator(s) and fuel storage
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Suction units	Telephone	Respiratory ventilators
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Monitoring units	HVAC	Other (please specify)
☐ Yes ☐ No	☐ Yes ☐ No	_____

4. What are the triggers for setting up this ACS?

   _____

5. * Is there an ACS employee plan?

   ☐   Yes

   ☐   No

   If yes, how will this site be staffed?

   _____

6. Is there enough personal protective equipment[2] (PPE) for ACS employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

   ☐   Yes

   ☐   No

---

[2]   There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

7.   ***** Is there a plan for transporting patients to the ACS if Emergency Medical Services (EMS) is overwhelmed?

☐   Yes

☐   No

If yes, describe this plan.

_____

8.   ***** Is there a plan to triage patients at the ACS during an influenza pandemic?

☐   Yes

☐   No

9.   ***** Is there a plan to manage patient care during an influenza pandemic with potential changes in treatment algorithms and adaptation of standards of care?

☐   Yes

☐   No

10.   Does the ACS stockpile antiviral medications or antibiotics?

☐   Yes

☐   No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

11.   Do the hospitals in the community know about this ACS?

☐   Yes

☐   No

12. * Is there a plan to enhance employee and patient security by:

   A. Increasing the existing security force?

      ☐ Yes

      ☐ No

   B. Using community law enforcement assets for crowd control, traffic flow, or guarding patients brought in from local jails or prisons for treatment?

      ☐ Yes

      ☐ No

13. * Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

      ☐ Yes

      ☐ No

14. * Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

      ☐ Yes

      ☐ No

15. Does this ACS have a designated Public Information Officer (PIO)?

      ☐ Yes

      ☐ No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for this ACS?

      ☐ Yes

      ☐ No

16. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____
_____
_____

Sector G MORTUARY SERVICES

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector G
Mortuary Services
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the mortuaries in the community. Questions about each individual public safety answering point (PSAP) will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many mortuaries are in the community?

   _____

2. Please list the main mortuaries in the community and then check the appropriate box for completion of Part 2.

   Mortuary Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Mortuary Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Mortuary Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Mortuary Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Mortuary Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

3.   * Are the mortuaries in the community actively involved in planning for an influenza pandemic?

    ☐   Yes

    ☐   No

4.   * What is the communication mechanism for mortuaries to coordinate with the community public health department during an influenza pandemic?

    _____

5.   * Does the Medical Examiner or Coroner's Office have a mass fatality management plan?

    ☐   Yes

    ☐   No

    * If yes, is the plan coordinated with the community's public health department?

       ☐   Yes

       ☐   No

Sector G
Mortuary Services
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each mortuary in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Mortuary Name _____

2. What is the total capacity of the mortuary (e.g., number of bodies stored or the number that can be processed in a day)? _____

3. * Does the mortuary have a mass fatality management plan?

   ☐ Yes

   ☐ No

   * If yes, does the plan include:

   A. Ways to increase storage capacity?

      ☐ Yes

      ☐ No

   B. Ways to increase staff if 30% are ill and cannot come to work?

      ☐ Yes

      ☐ No

   C. Procedures for isolating human remains due to infection or contamination concerns?

      ☐ Yes

      ☐ No

D. Backup isolation procedures if the storage facility is over capacity?

☐ Yes

☐ No

E. Environmental surety (ensuring the protection of water and food supplies, plans and procedures to restore facilities, and criteria for re-occupancy)?

☐ Yes

☐ No

4. * Have mutual aid agreements (MAAs) been completed with other mortuaries?

☐ Yes

☐ No

5. Have provisions been made for proper examination, preparation, and disposition for a surge in the number of deceased persons beyond the mortuary's normal capacity?

☐ Yes

☐ No

6. Does the mortuary have access to additional supplies, such as personal protective equipment (PPE) and body bags?

☐ Yes

☐ No

7. Is there enough personal protective equipment[1] (PPE) for employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

8. Are there materials to use if the mortuary runs out of body bags (e.g., rolls of plastic)?

☐ Yes

☐ No

Have vendor(s) or location(s) been identified from which to get these materials?

☐ Yes

☐ No

If yes, name the vendor(s) or location(s).

_____

9. Who in the community can legally certify deaths?

_____

10. How will bodies (corpses) be identified and documented during an influenza pandemic for persons who die at the following locations?

Hospitals _____

Home _____

Other locations _____

11. Will autopsies be done during an influenza pandemic?

☐ Yes

☐ No

If yes, will autopsies be restricted to certain situations?

☐ Yes

☐ No

If yes, please describe.

_____

12. Have mental health and faith-based resources been identified to help families during an influenza pandemic?

    ☐   Yes

    ☐   No

13. * Does the mortuary plan address religious and cultural differences about death (e.g., extended wakes) during an influenza pandemic, when social distancing measures may be in place?

    ☐   Yes

    ☐   No

If yes, describe how these differences will be addressed.

_____

14. How will funeral services be handled if the community uses social distancing measures?

_____

15. Does the mortuary have a temporary storage facility location?

    ☐   Yes

    ☐   No

If yes, where is it?

_____

16. Have any places been identified and approved to be used as temporary cemeteries?

    ☐   Yes

    ☐   No

If yes, where are they?

_____

17. Will people be allowed to do "green" burials?"[2]

    ☐ Yes

    ☐ No

18. Will the community waive medical examiner/coroner approval for cremation?

    ☐ Yes

    ☐ No

19.   * Is there a communication plan for family inquiries and decedent affairs?

    ☐ Yes

    ☐ No

20. Does the mortuary have a designated Public Information Officer (PIO)?

    ☐ Yes

    ☐ No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the mortuary?

    ☐ Yes

    ☐ No

21. Have messages been developed by a mortuary staff member or the PIO to inform the public about the proper handling and disposition of persons (e.g., family members) who die at home?

    ☐ Yes

    ☐ No

---

[2] A natural burial ground, also known as a green burial ground or eco-cemetery, is a cemetery where a body is returned to the earth to decompose and recycle normally. It is an environmentally sustainable alternative to existing funeral practices.

22. Has the local government identified who will staff satellite morgue facilities and who will handle body removal services?

☐ Yes

☐ No

23. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____
_____
_____

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Sector H

PALLIATIVE CARE/HOSPICE

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector H
Palliative Care/Hospice
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the palliative care/hospice facilities in the community. Questions about each individual palliative care/hospice agency will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many palliative care facilities are in the community?

   _____

2. How many hospice care facilities are in the community?

   _____

3. Please list the main palliative care/hospice facilities in the community and then check the appropriate box for Part 2.

   Facility Name _____

   ☐ Palliative Care

   ☐ Hospice Care

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Facility Name _____

   ☐ Palliative Care

   ☐ Hospice Care

   ☐ Part 2 completed

   ☐ Part 2 not completed

Facility Name _____

☐ Palliative Care

☐ Hospice Care

☐ Part 2 completed

☐ Part 2 not completed

Facility Name _____

☐ Palliative Care

☐ Hospice Care

☐ Part 2 completed

☐ Part 2 not completed

Facility Name _____

☐ Palliative Care

☐ Hospice Care

☐ Part 2 completed

☐ Part 2 not completed

Facility Name _____

☐ Palliative Care

☐ Hospice Care

☐ Part 2 completed

☐ Part 2 not completed

Facility Name _____

☐ Palliative Care

☐ Hospice Care

☐ Part 2 completed

☐ Part 2 not completed

Sector H
Palliative Care/Hospice
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each palliative care/hospice agency in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Facility or Agency Name _____

2. Place a check mark by the type of care provided in the community.

    ☐ Palliative Care

    ☐ Hospice Care

3. List the location of the care.

    ☐ Inpatient

    ☐ At Home

    ☐ Both

    If inpatient care is provided, identify the location.

    ☐ Long-term Care Facility

    ☐ Hospital

    How many beds does the inpatient center have?

    Licensed Beds _____

    Staffed Beds _____

4. * Does the community's influenza pandemic plan include a palliative care facility for patients who are not expected to survive?

    ☐ Yes

    ☐ No

5. On average how many patients receive care each day?

_____

6. How long is the average shift?

_____

7. * Is there a plan to increase staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, how would the staff be increased? [check all that apply]

☐ Use Local Registry (agency)

☐ Extend shift length (e.g., from 8 to 12 hours)

☐ Increase nurse-to-patient ratios

☐ Other (describe) _____

8. Is there enough personal protective equipment[1] (PPE) for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

9. Have policies been developed to separate current inpatients at palliative care centers from patients who are referred during an influenza pandemic?

☐ Yes

☐ No

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

10. ＊ Is there a plan to expand the facility's capacity to deliver palliative care during an influenza pandemic?

☐ Yes

☐ No

If yes, please explain.

_____

11. ＊ Is there an infection control plan for managing residents, at-home patients, and visitors during an influenza pandemic?

☐ Yes

☐ No

12. ＊ Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

☐ Yes

☐ No

13. Has a Public Information Officer (PIO) been designated?

☐ Yes

☐ No If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the agency?

☐ Yes

☐ No

14. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____
_____
_____

Sector I
OUTPATIENT/
WALK-IN CLINICS

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector I
Outpatient/Walk-In Clinics
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the outpatient/walk-in clinics in the community. Questions about each individual outpatient/walk-in clinic will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many outpatient/walk-in clinics are in the community?

   _____

2. Please list the main outpatient/walk-in clinics in the community and then check the appropriate box for Part 2.

   Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

Clinic Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

3. What role will outpatient/walk-in clinics play in the community's pandemic influenza planning?

_____

4. * Has coordination been completed with these clinics to address appropriate standards of care when resources are scarce?

   ☐ Yes

   ☐ No

If yes, please explain.

_____

Sector I
Outpatient/Walk-In Clinics
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each outpatient/walk-in clinic in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Outpatient or walk-in clinic name _____

2. What role will the clinic play during an influenza pandemic?

    _____

3. On average, how many patients does the clinic see every day?

    _____

4. How long is the average shift?

    _____

5. * Is there a plan to increase staff if 30% are ill and cannot come to work?

    ☐ Yes

    ☐ No

    If yes, how would the staff be increased? [check all that apply]

    ☐ Use Local Registry (agency)

    ☐ Extend shift length (e.g., from 8 to 12 hours)

    ☐ Increase nurse-to-patient ratios

    ☐ Other (describe) _____

6. ★ Is there a plan to combine employees with other clinics to maximize the use of licensed employees?

    ☐ Yes

    ☐ No

7. Will triaging of patients be done in the outpatient/walk-in clinic in order to decrease the large number of patients who can overwhelm the hospitals?

    ☐ Yes

    ☐ No

8. Has separate waiting areas been designated for patients with influenza-like illness symptoms?

    ☐ Yes

    ☐ No

9. Is there enough personal protective equipment[1] (PPE) for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

    ☐ Yes

    ☐ No

10. Does the clinic stockpile antiviral medications or antibiotics?

    ☐ Yes

    ☐ No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

11. * Is there a plan to enhance employee and patient security by:

A. Increasing the existing security force?

☐ Yes

☐ No

B. Using community law enforcement assets for crowd control, traffic flow, or guarding patients brought in from local jails or prisons for treatment?

☐ Yes

☐ No

12. Can the clinic be designated as an alternate care site?

☐ Yes

☐ No

If yes, please explain what types of services would be provided at the site?

_____

13. * Has coordination been made with the hospital emergency department (ED) to develop criteria for when to send patients to the ED?

☐ Yes

☐ No

14. * Are plans and materials readily available to conduct just-in-time training for qualified volunteers?

☐ Yes

☐ No

15. ***** Is there a plan to keep the clinic open 24/7 or extend hours to help reduce the number of patients who go to the hospital?

☐ Yes

☐ No

16. ***** Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

☐ Yes

☐ No

17. ***** Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

☐ Yes

☐ No

18. Does the clinic have a designated Public Information Officer (PIO)?

☐ Yes

☐ No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the clinic?

☐ Yes

☐ No

19. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

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Sector J

URGENT CARE CENTERS

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector J
Urgent Care Centers
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the urgent care centers in the community. Questions about each individual urgent care center will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many urgent care centers are in the community?

   _____

2. Please list the main urgent care centers in the community and then check the appropriate box for Part 2.

   Center Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Center Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Center Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Center Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Center Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

3. What is the role of urgent care centers in the community's pandemic influenza planning?

_____

4. *Has coordination been made with these clinics to address appropriate standards of care when resources are scarce?

☐ Yes

☐ No

If yes, please explain.

_____

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each urgent care center in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Urgent Care Center Name _____

2. What role will the center play during an influenza pandemic?

    _____

3. On average, how many patients does the center see every day?

    _____

4. How long is the average shift?

    _____

5. * Is there a plan to increase staff if 30% are ill and cannot come to work?

    ☐ Yes

    ☐ No

    If yes, how would the staff be increased? [check all that apply]

    ☐ Use Local Registry (agency)

    ☐ Extend shift length (e.g., from 8 to 12 hours)

    ☐ Increase nurse-to-patient ratios

    ☐ Other (describe) _____

6. * Is there a plan to share employees with other centers or clinics to maximize the use of licensed employees?

☐ Yes

☐ No

7. Has separate waiting areas been identified for patients with influenza-like illness symptoms?

☐ Yes

☐ No

8. Is there enough personal protective equipment[1] (PPE) for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

9. Does the center stockpile antiviral medications or antibiotics?

☐ Yes

☐ No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

10. * Is there a plan to enhance employee and patient security by:

    A. Increasing the existing security force?

       ☐ Yes

       ☐ No

    B. Using community law enforcement assets for crowd control, traffic flow, or guarding patients brought in from local jails or prisons for treatment?

       ☐ Yes

       ☐ No

11. Can the clinic be designated as an alternate care site?

    ☐ Yes

    ☐ No

If yes, please explain what types of services would be provided at the site.

_____

12. * Has coordination been made with the hospital emergency department (ED) to develop criteria for when to send patients to the ED?

    ☐ Yes

    ☐ No

13. * Are plans and materials readily available to conduct just-in-time training for qualified volunteers?

    ☐ Yes

    ☐ No

14. * Is there a plan to keep the center open 24/7 or extend hours to help reduce the number of patients who go to the hospital?

    ☐ Yes

    ☐ No

15.   * Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

      ☐   Yes

      ☐   No

16.   * Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

      ☐   Yes

      ☐   No

17.   Does the center have a designated Public Information Officer (PIO)?

      ☐   Yes

      ☐   No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the center?

      ☐   Yes

      ☐   No

18.   Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

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Sector K

PUBLIC HEALTH

☐ Complete

☐ To Be Determined

☐ Not Applicable

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the public health departments in the community. Questions about each individual public health department will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Are the following health department offices located in the community?

    A. City Health Department

        ☐   Yes

        ☐   No

    B. County Health Department

        ☐   Yes

        ☐   No

    C. Regional Health Department

        ☐   Yes

        ☐   No

    D. State Health Department

        ☐   Yes

        ☐   No

2. What is the role of the local health department (city and/or county) in the community's current pandemic influenza plan?

    _____

3. ***** Do the hospitals and public health departments in the community coordinate their pandemic influenza plans?

    ☐ Yes

    ☐ No

If yes, how do they coordinate their plans?

_____

4. What is the mechanism for communication between public health and the hospital systems (e.g., WebEOC, EMTrack, and LiveProcess)?

_____

5. Does the state have its own Health Alert Network (HAN)?

    ☐ Yes

    ☐ No

If yes, how does it work and who controls it?

_____

Does the community use a local system in addition to the HAN?

    ☐ Yes

    ☐ No

If yes, how does it work and who controls it?

_____

6. How will the Strategic National Stockpile (SNS) supplies be distributed, if they are needed?

_____

7. ***** Are there plans for mass vaccination clinics?

☐ Yes

☐ No

If yes, please describe these plans.

_____

8. ***** Are there plans for antiviral distribution clinics?

☐ Yes

☐ No

If yes, please describe these plans.

_____

9. What types of public health laboratories does the community have?

_____

A. What are their capabilities?

_____

B. Where are specimens sent?

_____

C. How are specimens transported?

_____

10. Does the community have a Medical Reserve Corps?

☐ Yes

☐ No

If yes, how is the Medical Reserve Corps mobilized?

_____

11. * Are nongovernmental organizations (e.g., Red Cross) involved in the local public
health pandemic influenza planning?

☐ Yes

☐ No

Sector K
Public Health
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each public health department in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Health Department Name and location _____

2. Check the box that applies to the health department's jurisdiction.

   ☐ City

   ☐ County

   ☐ Regional

   ☐ State

   ☐ Other _____

3. Does the health department provide primary care/clinical services?

   ☐ Yes

   ☐ No

   If yes, who receives primary care?

   ☐ Pediatrics

   ☐ Adults

   ☐ Both

4. On average, how many patients come to the health department for care every day?

   _____

5. How many of the employees actively provide primary care?

_____

6. How many of the employees can provide primary care during an influenza pandemic?

_____

7. * Is there a plan to increase staff if 30% are ill and cannot come to work?

☐   Yes

☐   No

If yes, how would the staff be increase? [check all that apply]

☐   Use Local Registry (agency)

☐   Extend shift length (e.g., from 8 to 12 hours)

☐   Increase nurse-to-patient ratios

☐   Other (describe) _____

8. Does the health department use volunteers?

☐   Yes

☐   No

9. * Is there a plan for the type of essential healthcare and public health services to be provided, and how they will be prioritized during an influenza pandemic?

☐   Yes

☐   No

If yes, what are these essential services?

Healthcare _____

Public Health _____

10. Will the health department triage patients for the community's hospitals during an influenza pandemic?

   ☐   Yes

   ☐   No

11. Have separate waiting areas been identified in the health department for patients with influenza-like illness symptoms?

   ☐   Yes

   ☐   No

12. Does the public health department have a pharmacy?

   ☐   Yes

   ☐   No

13. Is there enough personal protective equipment[1] (PPE) for employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

   ☐   Yes

   ☐   No

14. Does the health department stockpile antiviral medications or antibiotics?

   ☐   Yes

   ☐   No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

15.   * Does the pandemic plan designate alternate care sites (ACSs)?

    ☐   Yes

    ☐   No

    If yes, identify these sites and their locations?

    _____

    A. What community partners were involved in planning for the ACSs?

    _____

    B. What type of care will be provided at these sites?

    _____

    C. How will the ACSs be staffed?

    _____

    D. What is the plan for use of resources at the ACSs?

    _____

16.   * Is there a plan to address the special needs of vulnerable and hard-to-reach persons?

    ☐   Yes

    ☐   No

17.   * Are there protocols for using home isolation and quarantine?

    ☐   Yes

    ☐   No

18. ***** Is there a plan to address school closures during an influenza pandemic?

    ☐   Yes

    ☐   No

If yes, how will school closures be performed (e.g., per school or per county)?

_____

What are the triggers leading to this process?

_____

19. ***** Is there a plan for implementing social distancing measures?

    ☐   Yes

    ☐   No

If yes, when would these measures begin?

_____

20. ***** Does the health department plan to close during an influenza pandemic?

    ☐   Yes

    ☐   No

If yes, what are the triggers leading to this closure?

_____

21. * Does the surveillance plan for influenza pandemic cases include triggers for changing from passive to active surveillance?

    ☐ Yes

    ☐ No

If yes, what are these triggers?

_____

22. * Please briefly describe the active surveillance plan for an influenza pandemic?

_____

23. * Is there a surveillance plan for other types of diseases during an influenza pandemic?

    ☐ Yes

    ☐ No

If yes, briefly describe the other types of diseases

_____

24. * Have plans been coordinated with other applicable partners for the detection, tracking, and reporting of patients during an influenza pandemic?

    ☐ Yes

    ☐ No

25. * Does the plan maximize use of health information tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

    ☐ Yes

    ☐ No

26. Has a Public Information Officer (PIO) been designated?

    ☐   Yes

    ☐   No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the public health department?

    ☐   Yes

    ☐   No

27. Is the public health department's Emergency Operations Center (EOC) co-located with the local or jurisdictional EOC?

    ☐   Yes

    ☐   No

28. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector L
HOME
HEALTHCARE

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector L
Home Healthcare
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the home healthcare agencies in the community. Questions about each individual home healthcare agency will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many home healthcare agencies are in the community?

   _____

2. Please list the main home healthcare agencies in the community and then check the appropriate box for Part 2.

   Agency Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Agency Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Agency Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Agency Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Agency Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

Agency Name _____

☐ Part 2 completed

☐ Part 2 not completed

Agency Name _____

☐ Part 2 completed

☐ Part 2 not completed

Agency Name _____

☐ Part 2 completed

☐ Part 2 not completed

3. What role will home healthcare agencies play during an influenza pandemic?

   _____

4. ✳ Has coordination been made with these home healthcare agencies to address appropriate standards of care when resources are scarce?

   ☐ Yes

   ☐ No

   If yes, please explain.

   _____

Sector L
Home Healthcare
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about <u>each</u> home healthcare agency in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Home Healthcare Agency Name _____

2. Is the agency affiliated with a:

   ☐ Hospital system

   ☐ Long-term care facility

   ☐ Neither

3. Does the agency provide hospice services?

   ☐ Yes

   ☐ No

4. What is the role of the agency in the community's pandemic influenza planning?

   _____

5. * Has it been discussed with Emergency Medical Services (EMS) what services they would provide for the agency's patients during an influenza pandemic?

   ☐ Yes

   ☐ No

   If yes, what are those services?

   _____

6. ＊ Have there been discussions with the community's hospital(s) on their expectations of the types or levels of services the agency will provide to patients during an influenza pandemic?

☐ Yes

☐ No

If yes, what are those services?

_____

7. Has the scope of services been defined for those the agency will provide and that will be referred to other providers?

☐ Yes

☐ No

8. Do any of the employees work or volunteer for other healthcare organizations or hospital systems?

☐ Yes

☐ No

If yes, how will they split their time between agencies during an influenza pandemic?

_____

9. ＊ Is there a plan to increase staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, how would the staff be increased? [check all that apply]

☐ Use Local Registry (agency)

☐ Extend shift length (e.g., from 8 to 12 hours)

☐ Increase nurse-to-patient ratios

☐ Other (describe) _____

10. How many eight-hour or round-the-clock visits does the agency make each day?

_____

11. How many employees are needed to meet this demand?

_____

12. How many brief home visits (such as for wound care) does the agency make each day?

_____

13. How many employees are needed to meet this demand?

_____

14. Is there enough personal protective equipment[1] (PPE) for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

15. Does home healthcare stockpile antiviral medications or antibiotics?

☐ Yes

☐ No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

16. Have mental health and faith-based resources been identified to help patients and their families during an influenza pandemic ?

☐ Yes

☐ No

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

17.   ***** Is there a plan to use family members to provide care for their sick loved ones if there are limited employees during an influenza pandemic?

    ☐   Yes

    ☐   No

18. Have messages been developed to educate family members about the handling and disposition of patients who die at home?

    ☐   Yes

    ☐   No

19.   ***** Is there a contingency plan for an increased need for post-mortem handling and disposition of bodies?

    ☐   Yes

    ☐   No

20.   ***** Is there a plan for the transport of bodies in the event that patients die at home?

    ☐   Yes

    ☐   No

21.   ***** Has there been a discussion with hospital administrators about:

    A. Admission policies to the hospital and how they may change?

        ☐   Yes

        ☐   No

    B. Identifying priority patients for hospital admission?

        ☐   Yes

        ☐   No

C. Educating less critical patients to care for themselves?

☐ Yes

☐ No

D. Stockpiling supplies?

☐ Yes

☐ No

22. * Has there been a discussion with physicians' offices about:

A. Admission policies and how they may change?

☐ Yes

☐ No

B. Sharing employees with other facilities?

☐ Yes

☐ No

C. Identifying priority patients?

☐ Yes

☐ No

D. Educating less critical patients to care for themselves?

☐ Yes

☐ No

E. Stockpiling supplies?

☐ Yes

☐ No

23.   * Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

    ☐   Yes

    ☐   No

24.   * Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

    ☐   Yes

    ☐   No

25. Does the agency have a designated Public Information Officer (PIO)?

    ☐   Yes

    ☐   No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the agency?

    ☐   Yes

    ☐   No

26. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

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Sector M
LONG-TERM CARE

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector M
Long-Term Care
Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the long-term care agencies in the community. Questions about each individual long-term care agency will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many LTC facilities are in the community?

   _____

2. Please list the main LTC facilities in the community and then check the appropriate box for Part 2.

   Facility Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Facility Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Facility Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Facility Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Facility Name _____

   ☐ Part 2 completed

   ☐ Part 2 not completed

Facility Name _____

    ☐   Part 2 completed

    ☐   Part 2 not completed

Facility Name _____

    ☐   Part 2 completed

    ☐   Part 2 not completed

Facility Name _____

    ☐   Part 2 completed

    ☐   Part 2 not completed

3. What role will these LTC facilities play in the community during an influenza pandemic?

_____

4.   * Has coordination been made with these LTC facilities to address appropriate standards of care when resources are scarce?

    ☐   Yes

    ☐   No

If yes, please explain.

_____

Sector M
Long-Term Care
Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each long-term care agency in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. LTC Facility Name _____

2. What is the role of the facility in the community's pandemic influenza planning?

    _____

3. * Has coordination been made with Emergency Medical Services (EMS) regarding what services they would provide for the facility's patients during an influenza pandemic?

    ☐ Yes

    ☐ No

    If yes, what are those services?

    _____

4. * Has there been discussion with the community's hospital(s) on their expectations of the types or levels of services the LTC facility will provide to patients during an influenza pandemic?

    ☐ Yes

    ☐ No

    If yes, what are those services?

    _____

5. How long is the average shift?

    _____

6. * Is there a plan to increase staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, how would the staff be increased? [check all that apply]

☐ Use Local Registry (agency)

☐ Extend shift length (e.g., from 8 to 12 hours)

☐ Increase nurse-to-patient ratios

☐ Other (describe) _____

7. * Is there an infection control plan for managing residents and visitors during an influenza pandemic?

☐ Yes

☐ No

8. Is there enough personal protective equipment[1] (PPE) for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

9. Does the LTC facility stockpile antiviral medications or antibiotics?

☐   Yes

☐   No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

10. Does the facility have full-feature ventilators?

☐   Yes

☐   No

If yes, how many does the facility have?

_____

Can more ventilators be obtained if necessary?

☐   Yes

☐   No

If yes, where would additional full-feature ventilators and oxygen come from?

Ventilators _____

Oxygen _____

11. Does the facility have airborne infection isolation rooms (AIIRs)?

☐   Yes

☐   No

12.   ***** Is there a nurse staffing plan to manage patients on ventilators when 30% to 40% of the nurses may be out ill during an influenza pandemic (e.g., adjusted nurse-to-patient ratios or just-in-time training for volunteer nurses)?

      ☐ Yes

      ☐ No

13.   ***** Is there a plan to use family members to provide care for their sick loved ones, if there are limited employees during an influenza pandemic?

      ☐ Yes

      ☐ No

14.   ***** Is there a contingency plan for an increased need for post-mortem handling and disposition of bodies?

      ☐ Yes

      ☐ No

15.   ***** Is there a place in the facility that can be used as a temporary morgue, if needed?

      ☐ Yes

      ☐ No

16.   ***** Is there an alternate plan for body transport in the event that patients die at the LTC facility?

      ☐ Yes

      ☐ No

If yes, please describe this plan.

_____

17. * Is there a plan to enhance employee and patient security by:

A. Increasing the existing security force?

☐ Yes

☐ No

B. Using community law enforcement assets for crowd control, traffic flow, or guarding patients brought in from local jails or prisons as applicable?

☐ Yes

☐ No

18. * Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

☐ Yes

☐ No

19. * Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

☐ Yes

☐ No

20. Does the LTC facility have a designated Public Information Officer (PIO)?

☐ Yes

☐ No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the facility?

☐ Yes

☐ No

21. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____
_____
_____

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Sector N

PHARMACY

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector N

Pharmacy

Part 1

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the pharmacies in the community. Questions about each individual pharmacy will be answered in Part 2. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. How many pharmacies are in the community?

   Hospital-based _____

   Retail-based _____

   Other (e.g., long-term care pharmacies) _____

2. Please list the main pharmacies in the community and then check the appropriate box for Part 2.

   Pharmacy Name _____

   ☐ Hospital

   ☐ Retail

   ☐ Other

   ☐ Part 2 completed

   ☐ Part 2 not completed

   Pharmacy Name _____

   ☐ Hospital

   ☐ Retail

   ☐ Other

   ☐ Part 2 completed

   ☐ Part 2 not completed

Pharmacy Name _____

- ☐ Hospital
- ☐ Retail
- ☐ Other
- ☐ Part 2 completed
- ☐ Part 2 not completed

Pharmacy Name _____

- ☐ Hospital
- ☐ Retail
- ☐ Other
- ☐ Part 2 completed
- ☐ Part 2 not completed

Pharmacy Name _____

- ☐ Hospital
- ☐ Retail
- ☐ Other
- ☐ Part 2 completed
- ☐ Part 2 not completed

Pharmacy Name _____

- ☐ Hospital
- ☐ Retail
- ☐ Other
- ☐ Part 2 completed
- ☐ Part 2 not completed

3. Are any of these pharmacies open 24 hours?

    ☐   Yes

    ☐   No

    If yes, how many are there?

    Hospital-based _____

    Retail-based _____

    Other (e.g., long-term care pharmacies) _____

4. * Are any of these pharmacies involved in community influenza pandemic planning?

    ☐   Yes

    ☐   No

    If yes, please list them below.

    Hospital-based _____

    Retail-based _____

    Other (e.g., long–term care pharmacies) _____

5. Are the pharmacies in the community prepared to handle security issues arising from high demands for antiviral medications?

Hospital	☐ Yes	☐ No
Retail	☐ Yes	☐ No
Other	☐ Yes	☐ No

    If yes, please list.

    _____

6. Some pharmacies have an "inside clinic" staffed by a nurse practitioner to treat patients for very minor illnesses. Do any of the pharmacies have such clinics?

   ☐   Yes

   ☐   No

If yes, please list the names of these pharmacies.

_____

7. * Is there a plan to provide for extended hours of service?

   ☐   Yes

   ☐   No

8. * Does the plan designate "flu" pharmacies?

   ☐   Yes

   ☐   No

If yes, please list.

_____

9. * Does the plan designate certain pharmacies as a point of dispensing (POD) site for antiviral medications?

   ☐   Yes

   ☐   No

If yes, please list.

_____

10. * Do any of the pharmacies in the community plan to expand the scope of care provided
        by pharmacists (e.g., administer countermeasures)?

    ☐   Yes

    ☐   No

    If yes, please list.

    _____

Sector N

Pharmacy

Part 2

Questions in Part 2 should be answered by the most knowledgeable person(s) representing this sector. Please answer the following questions about each pharmacy in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. Pharmacy Name _____

2. Is the pharmacy:

   ☐   Hospital-based

   ☐   Retail-based

   ☐   Other _____

3. How long is the average shift?

   _____

4. * Is there a plan to increase staff if 30% are ill and cannot come to work?

   ☐   Yes

   ☐   No

   If yes, how would the staff be increased? [check all that apply]

   ☐   Use Local Registry (agency)

   ☐   Extend shift length (e.g., from 8 to 12 hours)

   ☐   Increase technician-to-pharmacist ratios

   ☐   Other (describe) _____

5. Is there a process to quickly verify a pharmacist's license?

   ☐   Yes

   ☐   No

6. Will employees be available to help other healthcare agencies, such as the public health department (e.g., administer immunizations)?

☐ Yes

☐ No

7. Does the pharmacy stockpile antiviral medications?

☐ Yes

☐ No

8. Does the pharmacy have a role with the Strategic National Stockpile (SNS)?

☐ Yes

☐ No

If yes, which types of medications are involved?

Antivirals _____

Antibiotics _____

9. What is the current stock of the following medications?

Tamiflu (oseltamivir) _____

Relenza (zanamivir) _____

10. Does the pharmacy stockpile medications used to treat *Staphylococcus aureus* pneumonia, and other secondary bacterial infections?

☐ Yes

☐ No

If yes, what medications are currently stocked? _____

11. Will the pharmacy be used as a point of dispensing (POD) site for antiviral medications during an influenza pandemic?

☐ Yes

☐ No

12. ***** Has coordination been made with suppliers to deliver additional medications such as antibiotics, antihistamines and cough medications after the first pandemic influenza case arrives in the local area?

☐ Yes

☐ No

13. ***** Is there a plan to acquire medications if the suppliers are unable or unwilling to deliver due to security issues?

☐ Yes

☐ No

14. ***** Do the pharmacists use defined protocols to screen patients and write orders under a supervising physician's authority?

☐ Yes

☐ No

15. Is there space to perform patient screening in the pharmacy?

☐ Yes

☐ No

16. Are the pharmacists trained and certified to give injections?

☐ Yes

☐ No

17. ***** Is there a plan for the type of essential healthcare services to be provided and how they will be prioritized during an influenza pandemic?

☐ Yes

☐ No

If yes, what are those essential healthcare services?

_____

18. Does the pharmacy track over-the-counter (OTC) medicine during the flu season?

☐ Yes

☐ No

19. Have employees been trained to conduct patient screening and to recommend over-the-counter (OTC) medications for mild cases?

☐ Yes

☐ No

20. ✳ Does the plan define the service group during an influenza pandemic?

☐ Existing patients only

☐ Community only

☐ Everyone

21. ✳ Does the plan address the indigent patient?

☐ Yes

☐ No

If yes, how will these patients be handled?

_____

22. Is there enough personal protective equipment[1] (PPE) for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐ Yes

☐ No

23. Does the pharmacy share the same PPE vendor(s) with the other pharmacies in the community?

☐ Yes

☐ No

---

[1] There is no formula currently recommended by the federal government to determine what constitutes "adequate PPE." It is up to the individual planner or sector representative to determine what is adequate.

24.   ***** Are there mutual aid agreements (MAAs) with other pharmacies?

    ☐ Yes

    ☐ No

25.   ***** Does the pandemic plan address enhanced employee and patient security by:

    A. Increasing the existing security force?

        ☐ Yes

        ☐ No

    B. Using community law enforcement assets for crowd control and traffic flow?

        ☐ Yes

        ☐ No

26.   Have separate waiting areas been designated for patients with influenza-like illness symptoms?

    ☐ Yes

    ☐ No

27.   Are phone or Internet requests for routine medications encouraged?

    ☐Yes

    ☐ No

28.   ***** Does the plan address alternate medicine delivery options to encourage social distancing (e.g., mail, personal delivery)?

    ☐ Yes

    ☐ No

29.   ***** Does the pharmacy have a plan to track inventory and communicate in "real time" with healthcare providers and the community's Emergency Operations Center (EOC)?

    ☐ Yes

    ☐ No

30. * Does the influenza pandemic plan include coordination with other community pharmacies?

   ☐   Yes

   ☐   No

31. * Is there a plan for communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

   ☐   Yes

   ☐   No

32. * Is there a plan to maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

   ☐   Yes

   ☐   No

33. Does the pharmacy have a designated Public Information Officer (PIO)?

   ☐   Yes

   ☐   No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the pharmacy?

   ☐   Yes

   ☐   No

34. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector O
EMERGENCY MANAGEMENT

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector O
Emergency Management

As an emergency management official, community planner or community disaster/emergency preparedness coordinator, please answer the following questions about emergency management agencies in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. What role will the local emergency management agency (EMA) play during an influenza pandemic?

   _____

2. * Is there a plan to increase staff if 30% are ill and cannot come to work?

   ☐ Yes

   ☐ No

   If yes, please describe.

   _____

3. What resources will the local EMA be able to provide during an influenza pandemic?

   _____

4. * Please list the various organizations/agencies participating in the community's influenza pandemic planning process.

   _____

5. * Please describe how the Emergency Operations Plan (EOP) and the community's Public Health Pandemic Influenza Plan work together.

   _____

6. * Does the local EOP plan address:

| Hospital bed availability | Critical employee shortages |
| ☐ Yes ☐ No | ☐ Yes ☐ No |

Hospital bed availability

☐ Yes   ☐ No

Hospital critical care bed availability

☐ Yes   ☐ No

Ventilator availability

☐ Yes   ☐ No

Other in-patient capacity

☐ Yes   ☐ No

Corpse/burial backlog

☐ Yes   ☐ No

Oxygen

☐ Yes   ☐ No

Critical employee shortages

☐ Yes   ☐ No

Antiviral medication courses

☐ Yes   ☐ No

Registry of available employees and volunteers and their specialties

☐ Yes   ☐ No

Logistical requirements and availability of supplies and equipment

☐ Yes   ☐ No

Functional status of critical infrastructures that support healthcare delivery

☐ Yes   ☐ No

7. * How does the plan address deaths that occur outside of the hospital?

_____

8. Have organizations that care for persons with special needs been identified?

☐   Yes

☐   No

If yes, please list these organizations.

_____

* Do these organizations have pandemic influenza preparedness plans in place?

☐   Yes

☐   No

9.   * Is there a plan for supporting public health authorities in detecting, tracking, and reporting patients during an influenza pandemic?

      ☐   Yes

      ☐   No

10.   * Does the plan maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

      ☐   Yes

      ☐   No

11.   Does the emergency management agency have a designated Public Information Officer (PIO)?

      ☐   Yes

      ☐   No

If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the emergency management agency?

      ☐   Yes

      ☐   No

12.   * Are there memoranda of agreement (MOAs), memoranda of understanding (MOU), or mutual aid agreements (MAAs) for alternative transportation if Emergency Medical Services (EMS) is unavailable?

      ☐   Yes

      ☐   No

13.   * Are there any other agreements (MOA, MOU, or MAA) in place for coordination in other areas during an influenza pandemic?

      ☐   Yes

      ☐   No

If yes, please list and describe each.

_____

14. Is the community's public health Emergency Operations Center (EOC) co-located with the EMA EOC?

☐ Yes

☐ No

How does this affect how community activities are reported to the state EMA or EOC?

_____

15. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____
_____
_____
_____

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Sector P

LOCAL GOVERNMENT

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector P
Local Government

As a local government official, community planner or community disaster/emergency preparedness coordinator, please answer the following questions about local government in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know."

1. What role will local government play during an influenza pandemic?

   _____

2. Please list the local government services that will support **public health** during an influenza pandemic.

   _____

3. Please list the local government services that will support **hospitals** during an influenza pandemic.

   _____

4. * Has there been discussion concerning the advantages and disadvantages of closing public facilities (such as schools) with those involved in such decisions to encourage social distancing during an influenza pandemic?

   ☐ Yes

   ☐ No

   If yes, have public health officials been involved in the discussion?

   ☐ Yes

   ☐ No

5. * Has there been discussion concerning the cancelling of public events to encourage social distancing?

   ☐ Yes

   ☐ No

6. * Are there mutual aid agreements (MAAs) with neighboring communities to share staff, if 30% of the local government employees are ill and cannot come to work?

☐ Yes

☐ No

If no, what are the plans to augment the staff?

_____

7. * Does the plan address facilities that public health will use for alternate care sites, triaging patients, and mass fatality storage?

☐ Yes

☐ No

If yes, please list.

_____

8. * Is there a security plan for facilities that will provide care to large numbers of people during an influenza pandemic?

☐ Yes

☐ No

9. * Is there a security plan for facilities that dispense drugs?

☐ Yes

☐ No

10. How will the community's patients be transported if Emergency Medical Services (EMS) is unavailable?

_____

11.   * Has coordination been made with funeral directors, coroner services, or the medical examiner to determine the availability of burial plots?

☐   Yes

☐   No

12.   Have employees been assigned to assist funeral homes with burials and/or cremations?

☐   Yes

☐   No

13.   * What is the plan to enforce public health isolation and quarantine orders?

_____

14.   * What is the contingency plan if police, fire, and EMS are overwhelmed?

_____

15.   * Have transportation assets been identified and coordinated?

☐   Yes

☐   No

16.   * Does the plan maximize the use of health information technology tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

☐   Yes

☐   No

17.   * Is there a plan to establish a Joint Information Center (JIC)?

☐   Yes

☐   No

18. Has a Public Information Officer (PIO) been designated?

☐ Yes

☐ No

If yes, is this PIO represented in the Joint Information Center (JIC) as a communications liaison for the local government agency?

☐ Yes

☐ No

19. * Has a team to work with public health been identified to ensure that important information is distributed to the public in a timely manner?

☐ Yes

☐ No

20. * Does the plan coordinate continuity of operations plans (COOPs) for:

A. Utilities?

☐ Yes

☐ No

B. Food delivery?

☐ Yes

☐ No

C. Communications?

☐ Yes

☐ No

D. Water?

☐ Yes

☐ No

E. Interpreters?

    ☐ Yes

    ☐ No

F. Medical triage centers?

    ☐ Yes

    ☐ No

21.   * Is there a plan for possibly waiving regulations that impact delivery of clinical care?

    ☐ Yes

    ☐ No

22. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

_____

_____

_____

Sector Q
VETERANS AFFAIRS MEDICAL CENTER

☐ Complete

☐ To Be Determined

☐ Not Applicable

Sector Q
Veterans Affairs Medical Center

Community planner or community disaster/emergency preparedness coordinator, please answer the following questions about the Veterans Affairs Medical Center (VAMC) in the community. Some questions are marked with an asterisk (*) to indicate very important questions about plans or working/coordinating with partners. If there is a limited amount of time available to complete all questions, these questions should be answered first. If a question cannot be answered, write "Does not apply" or "I do not know." **NOTE:** There is no Part 2 for this sector.

1. Is there a VAMC in the community?

   ☐ Yes

   ☐ No

   If no, please stop here as the remainder of this section is not applicable.

2. At what level is the VAMC trauma center certified, based on the American College of Surgeons?

   ☐ Level I

   ☐ Level II

   ☐ Level III

   ☐ Level IV

   ☐ State certified, but not American College of Surgeons certified

   ☐ Not trauma certified

3. Does the facility have airborne infection isolation rooms (AIIRs)?

   ☐ Yes

   ☐ No

   If yes, how many are certified?

   _____

4. Does the facility have positive-pressure rooms in the emergency department (ED) for immune-suppressed patients (e.g., bone marrow transplant patients or others who are severely immune-suppressed)?

☐ Yes

☐ No

If yes, how many are certified?

_____

How many are currently usable?

	AIIR	Positive-Pressure
Instantly?	_____	_____
Within 12 hours?	_____	_____
Within 24 hours?	_____	_____

5. On average, how many patients are admitted to the ED each day?

_____

6. On average, how many patients are admitted to the AIIRs each day through the ED?

_____

7. On average, how many patients are admitted to the positive-pressure rooms each day through the ED?

_____

8. * Is there a plan to increase staff if 30% are ill and cannot come to work?

☐ Yes

☐ No

If yes, how would the staff be increased? [check all that apply]

☐ Use Local Registry (agency)

☐ Extend shift length (e.g., from 8 to 12 hours)

☐ Increase nurse-to-patient ratios

☐ Reassign employees

☐ Other (describe) _____

9. * How would the VAMC adjust the caregiver to patient ratio staffing pattern with a surge of 30% to 50% more patients above the baseline level?

For the ED: _____

For CCU: _____

For Medical-Surgical floors: _____

10. * How would the VAMC adjust the caregiver to patient ratio staffing pattern with a surge of 50% to 100% more patients above the baseline level?

For the ED: _____

For CCU: _____

For Medical-Surgical floors: _____

11. * Is there a plan to allow credentialed employees from other facilities or hospitals to work in the medical center?

☐ Yes

☐ No

12. On a daily basis, what percentage of the staffing level is attained?
_____%

13. How often is there a need to supplement employees?

☐ Daily

☐ Weekly

☐ Monthly

14. Which departments generally lack sufficient staff?

☐ General Medical

☐ Pediatrics

☐ Surgery (post-surgical care)

☐ Intensive Care Unit (ICU)

☐ ED

15. * Does the pandemic plan address ways to increase operational (staffed) bed capacity?

☐ Yes, by at least 10%

☐ Yes, by at least 15%

☐ Yes, by at least 20%

☐ No

16. How many times a month (by shift) is the VMAC's ED at full or partial diversion?

	<u>Full</u>	<u>Partial</u>
Day	_____	_____
Evening	_____	_____
Night	_____	_____

17. * Is there a plan to cancel elective surgeries?

☐ Yes

☐ No

18. * Is there a plan to address other services that will be cancelled?

   ☐ Yes

   ☐ No

19. * Is there a plan for early discharge of patients during an influenza pandemic?

   ☐ Yes

   ☐ No

20. * Is there a memoranda of agreement (MOAs) with nearby extended care facilities or specialty care centers to care for patients discharged early from the medical center during an influenza pandemic?

   ☐ Yes

   ☐ No

Ventilators

21. How many working, full-feature ventilators does the facility have?

   _____

22. How many ventilators are available from any of the community's long-term care, rehabilitation, or satellite clinic facilities?

   Full-Feature _____

   Transport _____

23. * Is there a regional plan to provide extra ventilators, if needed?

   ☐ Yes

   ☐ No

24. * Are there plans for the VAMC to share resources with the community?

   ☐ Yes

   ☐ No

25. Does the facility have access to additional full-feature ventilators on an emergency basis?

☐ Yes

☐ No

A. How long does it take the facility to get these additional ventilators?

_____

B. How many additional ventilators can be obtained within four hours?

Full-Feature _____

Transport _____

C. How many additional ventilators can be obtained within eight hours?

Full-Feature _____

Transport _____

26. Do other hospitals in the community use the same ventilator vendor that the VAMC uses?

☐ Yes

☐ No

27. Please provide the name of the medical center's vendor(s).

_____

28. * Have the vendors planned for an increased demand for ventilators during an influenza pandemic event?

☐ Yes

☐ No

29. Which vendors supply oxygen to the medical center?

_____

30. Would the vendors have a problem meeting increased demand for oxygen during an influenza pandemic?

☐ Yes

☐ No

Standard of Care

31.   ***** Does the VAMC have algorithms or protocols for <u>withdrawing care</u> from patients who have a questionable chance of survival in order to preserve scarce resources?

       ☐   Yes

       ☐   No

32.   ***** Does the VAMC have algorithms or protocols for <u>withholding care</u> from patients who have a questionable chance of survival in order to preserve scarce resources?

       ☐   Yes

       ☐   No

33.   ***** Is there a plan to allow care for veterans' family members or non-veterans in the community?

       ☐   Yes

       ☐   No

If yes, please explain.

_____

Pharmaceuticals

34. Does the VAMC stockpile antiviral medications or antibiotics?

☐ Yes

☐ No

If yes, what is the current stock?

Antivirals _____

Antibiotics _____

Will these stockpiles be used for patients, employees, or both?

_____

* Plans

35. * Does the VAMC's Emergency Operations Plan address:

A. Designating mental health services (e.g., Critical Incident Stress Management [CISM]) to care for emergency employees, victims and others in the community who need special help coping with the effects of an influenza pandemic?

☐ Yes

☐ No

B. Mass immunization/prophylaxis?

☐ Yes

☐ No

C. Mass fatality management?

☐   Yes

☐   No

If yes, does the plan address the following?

1. Provisions to provide for the proper examination and disposition of bodies (corpses)?

    ☐   Yes

    ☐   No

2. Ways to increase morgue capacity and employees?

    ☐   Yes

    ☐   No

3. A backup procedure if the morgue is over capacity?

    _____

D. Environmental Surety (ensuring the protection of water and food supplies, plans and procedures to restore facilities, and criteria for re-occupancy)?

☐   Yes

☐   No

E. Personal protective equipment (PPE) (e.g., gowns, gloves, N95 respirators, surgical masks, or hand sanitizers) for the employees to cover the first wave of an influenza pandemic (approximately 8 to 12 weeks)?

☐   Yes

☐   No

Ensuring adequate supplies (including food, linens, and patient care items) are available from local suppliers and can be obtained in a timely manner to be self-sufficient for 96 hours?

☐   Yes

☐   No

F. Access to portable cots, sheets, blankets, and pillows?

☐ Yes

☐ No

G. Triage of mass illnesses that includes priority of care for different levels of severity?

☐ Yes

☐ No

H. Enhanced hospital security by:

1. Increasing the existing security of employees?

☐ Yes

☐ No

2. Using community law enforcement assets for crowd control, traffic flow, or guarding patients brought in from local jails or prisons for treatment?

☐ Yes

☐ No

3. Using private security companies?

☐ Yes

☐ No

If yes, please list.

_____

Do other hospitals in the area share the same security companies?

☐ Yes

☐ No

I. Pet sheltering to assist employees?

☐ Yes

☐ No

J. Eldercare or childcare to assist employees?

☐ Yes

☐ No

K. Coordination with state or local public health authorities?

☐ Yes

☐ No

L. Creating additional AIIRs?

☐ Yes

☐ No

36. *Does the medical center have an internal health surveillance system?

☐ Yes

☐ No

If yes, does the system track: [check all that apply]

☐ ED visits

☐ VAMC admissions (numbers and patterns)

☐ Patient monitoring for influenza-like illness (ILI)

☐ Employee monitoring for ILI

☐ Healthcare workers' exposure to ILI

A. How is this information collected?

_____

B. When is this information gathered?

_____

C. How often is this information gathered?

_____

D. Who gathers this information?

_____

E. Whom and how (e.g., by phone or fax) does the facility notify of unusual clusters of illnesses, and can those people be notified 24 hours per day?

_____

37. * Are there separate waiting areas in the VAMC for patients with ILI symptoms?

☐ Yes

☐ No

38. Does the plan address communicating with public health authorities to detect, track, and report patients during an influenza pandemic?

☐ Yes

☐ No

39. * Does the plan address the disposition of the "worried well" and the "not so sick" in areas other than the ED?

☐ Yes

☐ No

If yes, describe.

_____

40. * Is there a plan to maximize the use of health information tools, such as the state Health Alert Network (HAN), during an influenza pandemic?

☐ Yes

☐ No

41. *Does the VAMC have a designated Public Information Officer (PIO)?

    ☐ Yes

    ☐ No

    If yes, is this PIO represented in the community's Joint Information Center (JIC) as a communications liaison for the medical center?

    ☐ Yes

    ☐ No

42. Please describe any challenges to an influenza pandemic response not addressed in the questions listed above.

    _____
    _____
    _____

Acronyms

ACS	Alternate Care Site
AIIR	Airborne Infection Isolation Room
ALI	Automatic Location Identification
ANI	Automatic Numbering Identification
CCU	Critical Care Unit
CDC	Centers for Disease Control and Prevention
CISM	Critical Incident Stress Management
CNA	Certified Nurse Assistant
COOP	Continuity of Operations Plan
DHQP	Division of Healthcare Quality and Promotion
DOE	Department of Energy
ED	Emergency Department
EMA	Emergency Management Agency
EMS	Emergency Medical Services
EOC	Emergency Operations Center
FTE	Full-Time Employee
HAN	Health Alert Network
ICU	Intensive Care Unit
ILI	Influenza-Like Illness
JIC	Joint Information Center
LPN	Licensed Practical Nurse
LTC	Long-Term Care
MAA	Mutual Aid Agreement
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding

Acronyms

NICU	Neonatal Intensive Care Unit
NP	Nurse Practitioner (Advanced Practice Registered Nurse)
NPCC	Non-Profit Community Care
OB/GYN	Obstetrics/Gynecology
ORISE	Oak Ridge Institute for Science and Education
OT	Occupational Therapist
OTC	Over-the-Counter (medications)
PA	Physician Assistant
PC	Poison Center
PICU	Pediatric Intensive Care Unit
PIO	Public Information Officer
POD	Point of Dispensing
PPE	Personal Protective Equipment
PSAP	Public Safety Answering Point
PT	Physical Therapist
RN	Registered Nurse
RT	Respiratory Therapist
UCC	Urgent Care Centers
VA	Veterans Affairs
VAMC	Veterans Affairs Medical Center