

1. Structure for planning and decision making

- An internal, multidisciplinary planning committee for influenza preparedness has been created.

- A person has been designated as the influenza preparedness coordinator.

(Insert name) _____

- Members of the planning committee include the following hospital staff members (insert names)

- Administration _____
- Legal counsel _____
- Infection control _____
- Hospital disaster coordinator _____
- Risk management _____
- Facility engineering _____
- Nursing administration _____
- Medical staff _____
- Intensive care _____
- Emergency Department _____
- Laboratory services _____
- Respiratory therapy _____
- Psychiatry _____
- Environmental services _____
- Public relations _____
- Security _____
- Materials management _____
- Staff development _____
- Occupational health _____
- Diagnostic imaging _____
- Pharmacy _____
- Information technology _____
- Other members _____
- Other members _____

<ul style="list-style-type: none"> • A state or local health department person has been identified as a committee liaison. (Insert name) _____ • A linkage with local or regional emergency preparedness groups has been established (Planning organization) _____ 	
<p>2. Development of a written pandemic influenza plan</p>	
<ul style="list-style-type: none"> • A written plan has been completed or is in progress that includes the elements listed in #3 below. 	
<ul style="list-style-type: none"> • The plan specifies the circumstances under which the plan will be activated. 	
<ul style="list-style-type: none"> • The plan describes the organization structure that will be used to operationalize the plan. 	
<ul style="list-style-type: none"> • Responsibilities of key personnel related to executing the plan have been described. 	
<ul style="list-style-type: none"> • A simulation exercise has been developed to test the effectiveness of the plan. 	
<ul style="list-style-type: none"> • A simulation exercise has been performed. (Date performed _____) 	
<p>3. Elements of an influenza pandemic plan</p>	
<ul style="list-style-type: none"> • A surveillance plan has been developed. <ul style="list-style-type: none"> ◦ Syndromic surveillance has been established in the emergency room. ◦ Criteria for distinguishing pandemic influenza is part of the syndromic surveillance plan. ◦ Responsibility has been assigned for reviewing global, national, regional, and local influenza activity trends and informing the pandemic influenza coordinator of evidence of an emerging problem. (Name _____) ◦ Thresholds for heightened local surveillance for pandemic influenza have been established. ◦ A system has been created for internal review of pandemic influenza activity in patients presenting to the emergency department. ◦ A system for monitoring for nosocomial transmission of pandemic has been implemented and tested by monitoring for non-pandemic influenza. 	

- A **communication plan** has been developed.
 - Responsibility for external communication has been assigned.
 - Person responsible for updating public health reporting _____
 - Clinical spokesperson for the facility _____
 - Media spokesperson for the facility _____
 - Key points of contact outside the facility have been identified.
 - State health department contact _____
 - Local health department contact _____
 - Newspaper contact(s) _____
 - Radio contact(s) _____
 - Public official(s) _____
 - A list of other healthcare facilities with whom it will be necessary to maintain communication has been established.
 - A meeting with local healthcare facilities has been held to discuss a communication strategy.
 - A plan for updating key facility personnel on a daily basis has been established.

The person(s) responsible for providing these updates are:

- A system to track pandemic influenza admissions and discharges has been developed and tested by monitoring non-pandemic influenza admissions and discharges in the community.
- A strategy for regularly updating clinical, ED, and outpatient staff on the status of pandemic influenza, once detected, has been established. (Responsible person _____)
- A plan for informing patients and visitors about the level of pandemic influenza activity has been established.

- An education and training plan on pandemic influenza has been developed.
 - Language and reading level-appropriate materials for educating all personnel about pandemic influenza and the facility's pandemic influenza plan, have been identified.
 - Current and potential sites for long-distance and local education of clinicians on pandemic influenza have been identified.
 - Means for accessing state and federal web-based influenza training programs have been identified.
 - A system for tracking which personnel have completed pandemic influenza training is in place.
 - A plan is in place for rapidly training non-facility staff brought in to provide patient care when

the hospital reaches surge capacity.

- The following groups of healthcare personnel have received training on the facility's influenza plan:
 - Attending physicians
 - House staff
 - Nursing staff
 - Laboratory staff
 - Emergency Department personnel
 - Outpatient personnel
 - Environmental Services personnel
 - Engineering and maintenance personnel
 - Security personnel
 - Nutrition personnel

- A **triage and admission plan** has been developed.
 - A specific location has been identified for triage of patients with possible pandemic influenza.
 - The plan includes use of signage to direct and instruct patients with possible pandemic influenza on the triage process.
 - Patients with possible pandemic influenza will be physically separated from other patients seeking medical attention.
 - A system for phone triage of patients for purposes of prioritizing patients who require a medical evaluation has been developed.
 - Criteria for determining which patients need a medical evaluation are in place.
 - A method for tracking the admission and discharge of patients with pandemic influenza has been developed.
 - The tracking method has been tested with non-pandemic influenza patients.

- A **facility access plan** has been developed.
 - Criteria and protocols for closing the facility to new admissions are in place.
 - Criteria and protocols for limiting visitors have been established.
 - Hospital Security has had input into procedures for enforcing facility access controls.

- An **occupational health plan** has been developed.
 - A system for rapidly delivering vaccine or antiviral prophylaxis to healthcare personnel has been developed.
 - The system has been tested during a non-pandemic influenza season.
 - A method for prioritizing healthcare personnel for receipt of vaccine or antiviral prophylaxis based on level of patient contact and personal risk for influenza complications has been established.
 - A system for detecting symptomatic personnel before they report for duty has been developed.
 - This system has been tested during a non-pandemic influenza period.
 - A policy for managing healthcare personnel with symptoms of or documented pandemic influenza has been established. The policy considers:
 - When personnel may return to work after having pandemic influenza
 - When personnel who are symptomatic but well enough to work, will be permitted to continue working
 - A method for furloughing or altering the work locations of personnel who are at high risk for influenza complications (e.g., pregnant women, immunocompromised healthcare workers) has been developed.
 - Mental health and faith-based resources who will provide counseling to personnel during a pandemic have been identified.
 - A strategy for housing healthcare personnel who may be needed on-site for prolonged periods of time is in place.
 - A strategy for accommodating and supporting personnel who have child or elder care responsibilities has been developed.

- A **vaccine and antiviral use plan** has been developed.
 - A contact for obtaining influenza vaccine has been identified.
(Name) _____
 - A contact for obtaining antiviral prophylaxis has been identified.
(Name) _____
 - A priority list (based on HHS guidance for use of vaccines and antivirals in a pandemic when in short supply) and estimated number of patients and healthcare personnel who would be targeted for influenza vaccination or antiviral prophylaxis has been developed.
 - Number of first priority personnel _____
 - Number of second priority personnel _____
 - Number of remaining personnel _____
 - Number of first priority patients _____
 - Number of second priority patients _____

<ul style="list-style-type: none"> o A system for rapidly distributing vaccine and antivirals to patients has been developed. 	
<ul style="list-style-type: none"> • Issues related to surge capacity have been addressed. <ul style="list-style-type: none"> o A plan is in place to address unmet staffing needs in the hospital. o The minimum number and categories of personnel needed to care for a group of patients with pandemic influenza has been determined. o Responsibility for assessing day-to-day clinical staffing needs during an influenza pandemic has been assigned. <p>Persons responsible are: (names and/or titles)</p> <hr/> <hr/> <ul style="list-style-type: none"> o Legal counsel has reviewed emergency laws for using healthcare personnel with out-of-state licenses. o Legal counsel has made sure that any insurance and other liability concerns have been resolved. o Criteria for declaring a "staffing crisis" that would enable the use of emergency staffing alternatives have been defined. o The plan includes linking to local and regional planning and response groups to collaborate on addressing widespread healthcare staffing shortages during a crisis. o A priority list for reassignment and recruitment of personnel has been developed. o A method for rapidly credentialing newly recruited personnel has been developed. o Mutual AID Agreements (MAAs) and Memoranda of Understanding/Agreement (MOU/As) have been signed with other facilities that have agreed to share their staff, as needed. 	
<ul style="list-style-type: none"> • Strategies to increase bed capacity have been identified <ul style="list-style-type: none"> o A threshold has been established for canceling elective admissions and surgeries o MOAs have been signed with facilities that would accept non-influenza patients in order to free-up bed space o Areas of the facility that could be utilized for expanded bed space have been identified o The estimated patient capacity for this facility is _____ o Plans for expanded bed capacity have been discussed with local and regional planning groups 	
<ul style="list-style-type: none"> • Anticipated durable and consumable resource needs have been determined <ul style="list-style-type: none"> o A primary plan and contingency plan to address supply shortages has been developed o Plans for obtaining limited resources have been discussed with local and regional planning and response groups. 	

- A strategy for handling increased numbers of deceased persons has been developed.
 - Plans for expanding morgue capacity have been discussed with local and regional planning groups.
 - Local morticians have been involved in planning discussions.
 - Mortality estimates have been used to estimate the number of body bags and shrouds.
 - Supply sources for postmortem materials have been identified.

[top of page](#)

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