

*Please note that this presentation was developed in response to a member request.
If you require updated information, please reach out to contact@hbinsights.com.*

Hospital Response Plans to COVID-19

Sample Surge Plans and Preparedness Checklists

Analyst: Sumeera Sra

Published: April 2020



Synthesis

- As the healthcare system in the United States continues to battle the COVID-19 pandemic, there is a growing concern on what kind of capacity issues facilities will be facing.
- As such, hospitals across the country are working to maximize their operational efficiencies and increase the number of beds to cater to an influx of patients.
- Many hospitals and key medical societies in the United States had already created recommendations on surge capacity, while some have updated response plans specifically to help manage the current COVID-19 outbreak.
 - For example, the CDC recently published a preparedness checklist to help hospitals ready themselves for the pandemic, including a surge of patients.
 - Other organizations have recreated thorough response and surge plans, which include details on what changes are necessary to handle more patients. For example, Rush University System for Health published a plan that describes several department's strategies to increase beds for COVID-19 patients.

Key Takeaways

There are various documents and strategies available to healthcare facilities to help hospital leaders and front-line workers manage the COVID-19 outbreak—including surge capacity and response plans.

To handle an increase in the patient volume, some of the specific steps being done at hospitals during the pandemic include:

- Setting up separate COVID-19 clinics to do screening and testing
- Opening a triage tent or drive-through site to limit unnecessary ED and hospital visits
- Postponing elective surgeries so that more beds are available
- Converting beds in other areas such as rehabilitation facilities into inpatient beds
- Screening and triaging patients in the ambulance bay area

The following slides include sample response plans that either give a hospital-wide or unit-specific response to a surge of COVID-19 cases, as well as a few preparedness checklists.

Example of a Hospital-Wide Response Plan

[A Playbook for Navigating the Clinical and Operational Challenges of a Global Health Crisis](#), Rush University System for Health, 2020 Mar

Rush University System for Health developed a response plan, which consists of a number of strategies to manage the COVID-19 outbreak. Some of the strategies to increase operational efficiency during this time include adjusting the number of beds and operations in the ED, inpatient, and ambulatory departments.

ED

- Rush University Medical Center set up a triage tent in its ambulance bay area, which allowed staff to screen about 100 patients per day in the first week of initiating the use of the tent.
- To avoid the spread of infection, they redirected all patients presenting with respiratory symptoms to a negative pressure room. This helped the organization avoid overcrowding in the ED while also addressing the growing demand for testing and specialized care.

Inpatient Departments

- To address the concerns regarding bed availability, the organization began to use its rehabilitation facility as a medical unit.
- The organization also converted half of the beds in its orthopedic unit into negative pressure rooms to help isolate COVID-19 patients.

Ambulatory Departments and Beyond

- The health system set up a COVID-19 clinic to more quickly evaluate high-risk patients under investigation.
- Patients can be referred to the clinic from a virtual visit or another location. The patient is brought into the clinic for a swab test and then sent home to self-quarantine until the test results are available.
- A Mobile Swab Swat Team consisting of trained nurses was also created to assist in screening at clinics that are not set up for point-of-care flu and COVID-19 testing.
 - These clinics can page the mobile team when a suspected case of COVID-19 presents.
 - The team collects the sample and sends it to the lab for testing.

Sample ED Plans

[Michigan Immediate Bed Availability Decompression Strategy Guidelines and Toolkit](#), Michigan Department of Health and Human Services, 2018 Feb

- This document describes the guidelines and strategies that can be adopted by healthcare organizations to increase bed availability during disasters or disease outbreaks.
- Various measures to put in place to increase efficiency in the ED include:
 - Conducting initial screening and triage in the ambulance bay area
 - Designating a separate area for patients waiting for test results or sending them home until results are available
 - Instituting additional staff to cater to growing influx of patients
 - Transferring or discharging stable patients as quickly (and safely) as possible
 - Monitoring supplies
 - Separating treatment areas depending on the specific injuries/illnesses
- In addition, the [Community Emergency Department Overcrowding Scale \(CEDOCS\)](#) can help to assess the degree of overcrowding and manage the situation in a more efficient manner.

[National Strategic Plan for Emergency Department Management of Outbreaks of COVID-19](#), American College of Emergency Physicians, 2020

- Resource highlights the various actions that healthcare organizations can take to ensure their ability to provide emergency services to patients during the COVID-19 outbreak.
- Some of the actions include:
 - Forming a COVID-19 planning group in the hospital to champion efforts
 - Developing protocols for initiating use of alternate sites/tents
 - Ensuring availability of staff for alternate sites
 - Separating patients with respiratory symptoms from other patients in waiting areas
 - Ensuring the availability of PPE for medical staff
 - Documenting protocols regarding the prophylaxis and screening of staff
 - Developing policies for visitor entry, including limiting visitors



Sample ICU Plans

[U.S. ICU Resource Availability for COVID-19](#), Society of Critical Care Medicine, 2020 Mar

- This article highlights the strategies to help overcome a shortage of ICU beds during a healthcare crisis, including:
 - Cancelling elective surgeries
 - Utilizing operating rooms with ventilators
 - Utilizing step-down unit beds as ICU beds

[SARS-CoV-2 \(COVID-19\) Toolkit](#), Massachusetts General Hospital, 2020 Feb

- This organization created a response plan specifically for the COVID-19 outbreak.
- To manage a surge in the ICU, the organization recommends:
 - Shifting stable patients on ventilators in ICUs to general beds in airborne infection isolation rooms
 - Identifying spaces where the entire unit can be converted into negative pressure rooms if the patient load further increases.

[ICU Preparedness Checklist](#), Society of Critical Care Medicine, 2020

- Resource highlights the various parameters that hospitals should take into consideration during operational planning for the COVID-19 pandemic—such as:
 - Identifying contingency units
 - Establishing protocols for testing ICU staff
 - Developing triage protocols and communicating them to the staff
 - Monitoring supplies and developing policies for distribution of PPE to the staff
 - Managing air circulation in the ICU
 - Preparing plan to employ additional staff during surge

Please also see the organization's chapter "How to Build ICU Surge Capacity" on [page 98](#) of this document.



Sample Preparedness Checklists for COVID-19

Source <i>(Organized by Relevance)</i>	Source Description	Highlights	Additional Notes/Resources
Comprehensive Hospital Preparedness Checklist for Coronavirus Disease 2019 (COVID-19) , CDC, 2020 Mar	<ul style="list-style-type: none"> Checklist developed by the CDC to assist hospitals in preparing for and responding to the COVID-19 outbreak. 	<ul style="list-style-type: none"> To ensure proper planning, hospitals should develop a multidisciplinary team and a written COVID-19 plan. Hospitals need to develop strategies such as alternate triage sites, use of telemedicine, and the like to cater to an influx of patients in the ED and other areas. Page 11 highlights the key points that should be taken into consideration while developing surge capacity plans. 	<ul style="list-style-type: none"> The American College Health Association gives additional recommendations on preparing for COVID-19—some of which are based on the CDC’s current guidelines.
COVID-19 Healthcare Planning Checklist , HHS, 2020 Mar	<ul style="list-style-type: none"> Checklist includes the activities that are needed to respond to the COVID-19 pandemic. 	<ul style="list-style-type: none"> Hospitals should develop protocols to isolate patients in the waiting areas and the ED, monitor supplies, and identify alternate care sites to address increased inflow of patients. 	<ul style="list-style-type: none"> Page 6–7 describes activities that are essential for ED in particular, such as: “Determine screening process and location (e.g., curb side screening prior to entry, supplemental screening at intake, etc.).”
Hospital Seasonal Influenza/Pandemic Preparedness Checklist , California Hospital Association, 2020 Feb	<ul style="list-style-type: none"> Checklist of the ways in which healthcare organizations can meet the demands of the current outbreak. 	<ul style="list-style-type: none"> Healthcare organizations should document proper plans for expansion of areas for treating an influx of patients during outbreaks and develop triage plans for separating infectious and non-infectious patients. 	<ul style="list-style-type: none"> Page 3 highlights the association’s triage recommendations.

Note to Members

This presentation is based on publicly available information as well as information provided to or represented to Healthcare Business Insights (“HBI”) from numerous sources which are generally deemed reliable. While HBI believes the information is both accurate and complete, HBI does not represent this information as such.

HBI does not provide organizations with legal, clinical, or other professional advice, and this presentation should not be regarded as such under any particular circumstances. Members should not rely on any legal commentary in this presentation as a basis for action or assume that all practices within are legally permitted. HBI is not liable for any claims or losses that arise from any errors or omissions in this resource.

This presentation has been developed by HBI for exclusive use by its members and contains proprietary information belonging to HBI. Therefore, without the express consent of HBI, members are expected to maintain the information provided in the strictest confidence and not disclose this presentation, or any part of it, to third parties; and not use HBI’s name in any promotion, prospectus or other document available to third parties. Notwithstanding the foregoing, HBI shall not be liable to, nor shall there be any reliance on the presentation by, any member, organization, or third party.

QUESTIONS?

Sumeera Sra

RESEARCH ASSOCIATE

888.700.5223



Part of **Clarivate**

Tel 1.888.700.5223

Email contact@hbinsights.com

Website hbinsights.com