

Pandemic Surge Site Assessment Tool

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| Instructions: | | <p>Prior to use of this assessment tool, broadly determine suitability for modifications of existing space to meet clinical need (LINK to Decision Tree).</p> <ol style="list-style-type: none"> 1. Answer the questions under "Need for Space Modification (Program Statement)" located in column B, row 2. If all of the answers are "N" this tool may not apply. 3. Proceed to "Description of Existing Space to be modified." Once space for modification is identified, select the appropriate tab below for each space type. 4. Use the "Description of Service/ Pandemic Considerations" column (B) to identify components that must be available at the clinical space type which you have selected in step 2. 5. Review all articles in column B using column C to check off the spaces ability to meet the need. <p>This tool may be utilized to demonstrate your site assessment process and communicate rationale for existing space modifications with regulatory agencies.</p> | | | | |
| Need for Space Modification (Program Statement): | Add additional patient care capacity (Y/N) Optimize environment of care for Infection Prevention strategies (Y/N) Create additional Airborne Infection Isolation Room (AIIR) capacity (Y/N) | | | | | |
| Description of Existing Space to be modified: | Emergency Department (Y/N) Intensive Care Unit (Y/N) Operating Room/Protective Environment (Y/N) General Med-Surg (Y/N) Ambulatory Care (including dedicated testing sites) (Y/N) Post Acute/LTC (Y/N) | | | | | |
| Anticipated Target Date of Deployment: | | | | | | |
| Estimated Duration of Need for Modified Space: | | | | | | |
| Facility Type: | | | | | Date of Assessment: | |
| DETERMINING REGULATORY COMPLIANCE BASED ON SAFETY AND DURATION OF MODIFIED SPACE USE | | | | | | |
| Select columns to the right based on anticipated duration of use for modified space. Where applicable, column D will link out to solutions to barriers identified in column C. Use column E to review all hard stops Use column F for level 2 assessments where alterations can be made Use column G for note taking | | | | | | |
| Service Use Type | Description of Service/Pandemic Considerations | (Applicable only for repurposed spaces) Y/N | Goals to Address | Hard Stops | Proceed to level 2 assessment | Notes |
| General Site Analysis | | | | | | |

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|----------------------|---|---|------|----------|----------|---|--|--|
| ADA provision | Space is safe for occupancy and expected patient population | | | STOP | X | | | |
| | Sufficient space for patient care type and anticipated volume | | | | X | | | |
| | Appropriate access to the space and the ability to control access | | 12-U | | | | | |
| | Appropriate access to parking and access to the exterior of the facility | | | | X | | | |
| | Diagnostic Support | Sufficient space to allow for staff work areas and respite areas | | 15-U | | | | |
| | | Sufficient lighting | | 4-U | STOP | | | |
| | | Sufficient space for management of supplies (including relevant PPE, linen, patient care supplies and durable medical equipment) and waste: <ul style="list-style-type: none"> · Within clinical location · Within the overall space · Moving in and out of the space | | 9-U/R-12 | | | | |
| | | | | | 9-U/R-12 | | | |
| | | | | | 9-U/R-12 | | | |
| | | | | 9-U/R-12 | | | | |
| | Infrastructure- (Architecture, Ventilation, Electrical Systems, Plumbing Systems, Medical Gases, Fire Safety) | Space allows for ADA requirements <ul style="list-style-type: none"> · Access ramps or other relevant means of vertical transport · Other mobility access accommodations (e.g. self-opening doors) · Able to accommodate individuals of size | | | | X | | |
| | | | | | | X | | |
| | | | | | | X | | |
| | Architecture | Suitable space for Laboratory Services | | 7-U | | | | |
| | | additional equipment(s) | | 7-U | | | | |
| | | supportive electrical, water and waste requirements | | 7-U | | | | |
| | | supplies and personnel space | | 7-U | | | | |
| | | Space can accommodate increased testing capability | | 7-U | | | | |
| | | Suitable space for the storage of pharmaceuticals and sterile supplies (as needed) | | 9-U | | | | |
| | | Secure area for medication storage and preparation needs. Access to appropriate refrigeration. | | 9-U | | | | |
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| | Adequate space for each patient bed area | | | | | X | | |
| | Door widths can accommodate patient care equipment | | | | | X | | |
| | Increased line-of-sight capability | | 19-U | | | | | |
| | Capability to distance work spaces in administrative areas OR create separation of staff work areas from patient care areas | | | | | X | | |
| | Ventilation | | | | | | | |

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|--|---|--|------|------|--|--|
| | Adequate ventilation systems | | R-17 | | | |
| | Electrical Systems | | | | | |
| | Sufficient electrical capability for modifications, if any | | R-28 | STOP | | |
| | Emergency power or access for mobile generator set-up | | | STOP | | |
| | Sufficient power for low-voltage systems/devices | | | STOP | | |
| | Plumbing Systems | | | STOP | | |
| | Sufficient locations for waste disposal sanitary sewer | | R-41 | STOP | | |
| | Access to potable water | | R-35 | STOP | | |
| | Sufficient toileting facilities | | U-34 | STOP | | |
| | Showering facilities availability for staff | | | | | |
| | Medical Gases | | | STOP | | |
| | Supplemental medical gases and suction | | R-45 | STOP | | |
| | Access to mobile bulk oxygen | | R-52 | STOP | | |
| | Fire Safety | | | | | |
| | Sufficient fire detection and suppression systems in place | | R-5 | STOP | | |
| General Infection Prevention Provisions | | | | | | |
| | Sufficient hand hygiene capability | | R-55 | | | |
| | Site supports implementation of engineering and/or administrative controls to isolate patients and reduce exposure risk to staff | | U-15 | | | |
| | Site supports implementation of engineering and/or administrative controls to separate patients suspected of having a transmissible infection from other patients | | U-15 | | | |
| | Adequate airborne infection isolation during aerosol generating procedures within the pre/post-procedure care area | | R-17 | | | |
| Intake/Assessment | | | | | | |
| | Symptom screening location(s) | | U-22 | | | |
| | Space to cohort suspect or known positive patients | | | X | | |
| | Point of care Lab testing capability | | | X | | |
| Emergency Services | | | | | | |
| | Ability to cohort suspect or known positive patients for exam or treatment | | | | | |
| | Provision of inpatient care (ED boarding) if inpatient transfer to bed is delayed | | | | | |
| Ambulatory Services | | | | | | |
| | Additional general exam capability | | | | | |
| | Infusion areas to cohort both suspect or known positive patients | | | X | | |
| General Patient Care | | | | | | |

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|--------------|--|--|------|---|--|--|
| | Electronic monitoring capability | | | X | | |
| | Security communication | | | X | | |
| | Sufficient Wi-Fi capability to support clinical needs (EHR, Device integration, etc) | | | X | | |
| | Adequate IT and communications capacity | | R-46 | | | |
| | Means of communication from within patient room to outside patient room | | R-47 | | | |
| | Alternate communication capabilities to allow patient/family communication | | R-47 | | | |
| Other | | | | | | |