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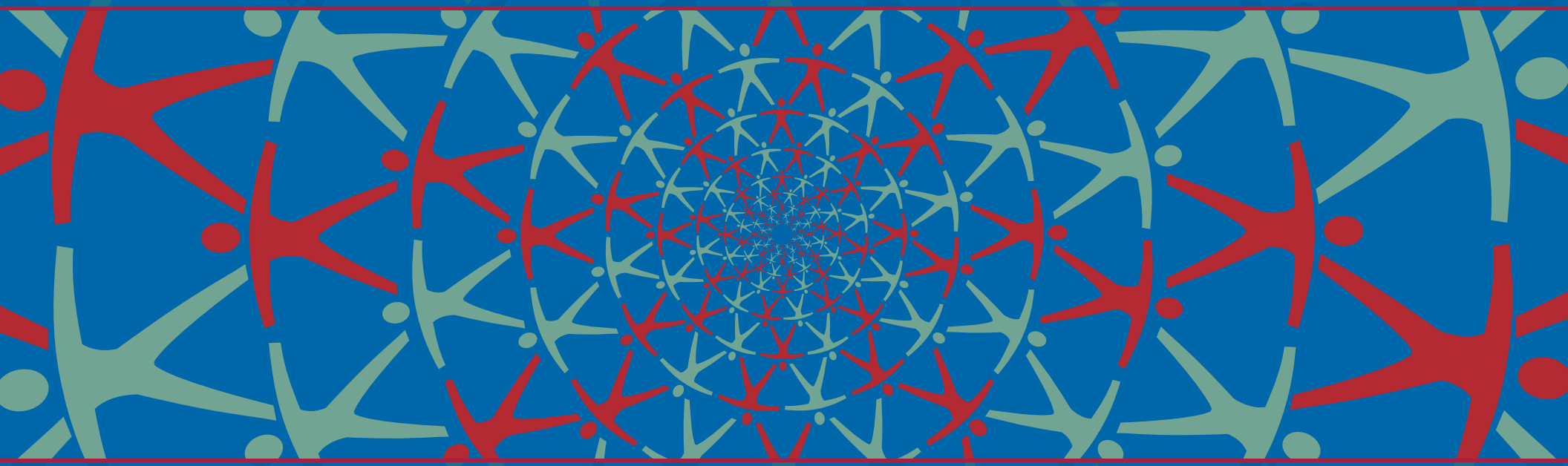
Patient Surge in Disasters:
A Hospital Toolkit for Expanding Resources in Emergencies



Emergency Department Capacity Expansion Tool (EDCET)

NYC Health

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Table of Contents

Guidance Document 4
Summary Document - Planning 8
Introduction and Overview 8
Organization Structure 9
Key Surge Planning Steps 10
Summary Document - Response 16
Introduction and Overview 16
Key Surge Response Steps 17
Appendices 19
Introduction 19
Appendix A 20
Facilities 20
Appendix B 23
Equipment & Supplies 23
Appendix C 26
Staffing Plan 26

ED Capacity Expansion Tool (EDCET)
Guidance Document

INTRODUCTION & OVERVIEW

From infectious disease outbreaks to chemical spills, mass casualty scenarios have the potential of overwhelming Emergency Department (ED) resources. Depending on the incident's severity and/or duration, your ED (or equivalent area) may need to consider expanding capacity (and rapidly) in order to cope with incident-related patient volume.

The EDCET was developed as an all-hazards tool with a particular emphasis on helping hospital Emergency Departments manage high patient volume through capacity expansion while keeping the ED uncontaminated during a mass casualty incident such as an influenza pandemic.

The Emergency Department Capacity Expansion Tool (EDCET) planning and response activities and tools will challenge the emergency planner to create hospital-specific plans that will identify and support expansion areas within and (preferably) nearby the Emergency Department.

PURPOSE

The Emergency Department Capacity Expansion Tool is designed to assist hospital administrators and emergency managers in preparing for and responding to unexpected increases in patient volume. The EDCET follows the Bed Surge Capacity Expansion Tool (BSCET) and the Rapid Discharge Tool (RDT) in the Patient Surge in Disasters: A Hospital Toolkit for Expanding Resources in Emergencies.

OBJECTIVE

The objective of the EDCET is to identify opportunities for the creation of additional staffed and supported screening, triage, treatment and patient holding areas during the immediate and sustained phases of a public health emergency. For purposes of emergency planning and response, the EDCET can be activated to both complement and run

concurrent with RDT and BSCET activities in the timeline of a public health emergency where there is significant increase in both outpatient and inpatient demand; or, the EDCET can be used as a stand-alone tool when the increased patient demand is primarily ambulatory.

AUDIENCE

Because a mass casualty incident can occur at any time, the *Emergency Department Capacity Expansion Tool* offers a wide range of effective actions to increase surge capacity. This tool may be especially useful to hospital personnel in the following areas:

- Incident Command Center
- ED Administration
- ED Clinicians
- Off-hours Nursing Supervision / Hospital Administration
- Emergency Management

GUIDELINES FOR USE

The *EDCET* is formatted as a quick reference guide for healthcare professionals. Each section of the tool is divided into columns which are defined as follows:

Action

An action is a set of planning or response activities that leads to increasing ED capacity.

Phase

A phase is the period of time during which emergency preparedness or response activities occur. There are two ED-specific phases in this tool:

- *Planning*: the preparatory time prior to an emergency incident.
- *Response*: the time directly after the occurrence of a mass casualty incident when the ED must immediately meet accelerated patient demand; and, the period directly following when patient volume continues to exceed the Emergency Department's ability to accommodate the increased number of patients.

Step(s)

Activities outlined within an *Action* that are intended to achieve one or more outcomes.

Outcome(s)

The result(s) of a team's conducting an Action's steps and activities. The benefits of each outcome are summarized in comments in the *Outcome(s)* column. We recommend reading these comments before undertaking the action to determine what shape these benefits may take in your Emergency Department.

ABBREVIATIONS

See *Patient Surge in Disasters: A Hospital Toolkit for Expanding Resources in Emergencies – Introduction and References* for keyword and abbreviation explanations.

SUMMARY DOCUMENTS

Summary Documents are provided on pages 8 and 16 to preview the planning and response sections (respectively) of the *Emergency Department Capacity Expansion Tool* (EDCET).

APPENDICES

To help surge capacity planners incorporate the planning and response components of the *Emergency Department Capacity Expansion Tool* (*ED*CET) into their emergency plans, the following appendices are attached:

- Appendices: Introduction (page 19)
- Appendix A: Facilities (page 20)
- Appendix B: Equipment & Supplies (page 23)
- Appendix C: Staffing Plan (page 26)

AUTHORSHIP

Many of the activities and recommendations contained in this tool were drawn from the *Promising Practices and Recommendations for Hospitals for Bed Utilization and Personnel,* Parts I & II (Surge Capacity Advisory Group, MediSys Health Network/Continuum Health Partners CBP, 2006), New York City Department of Health and Mental Hygiene's Surge Capacity Planning Toolkit, the 2009 *Alternate Care Site for Screening & Isolation* survey of 63 NYC hospitals, and in reviews of draft EDCET templates performed by Nicholas Vaccari, MD and Frank Mineo, PhD.

Substantive editing of this work was performed by William Lang, MS, an Administrative Consultant with an extensive background in hospital operations and emergency management.

ED Capacity Expansion Tool
Summary Document - Planning

Introduction and Overview

In a mass casualty incident, there will most likely be an immediate and sustained demand for additional, available inpatient beds. Having determined that the two most effective methods for increasing bed capacity are **rapid discharge** and **capacity expansion,** the New York City Department of Health and Mental Hygiene (NYC DOHMH) developed the Rapid Discharge Tool (RDT) and the Bed Surge Capacity Expansion Tool (BSCET). But because increases in patient volume will first be seen in hospital emergency departments, the *Emergency Department Capacity Expansion Tool* (EDCET) was written in order to complement the BSCET as a way of helping hospital Emergency Departments manage high patient volume through capacity expansion while keeping their EDs uncontaminated. The EDCET planning and response activities and tools are intended to assist the emergency planner in identifying, creating, and supporting expansion areas within and (preferably) nearby the Emergency Department.

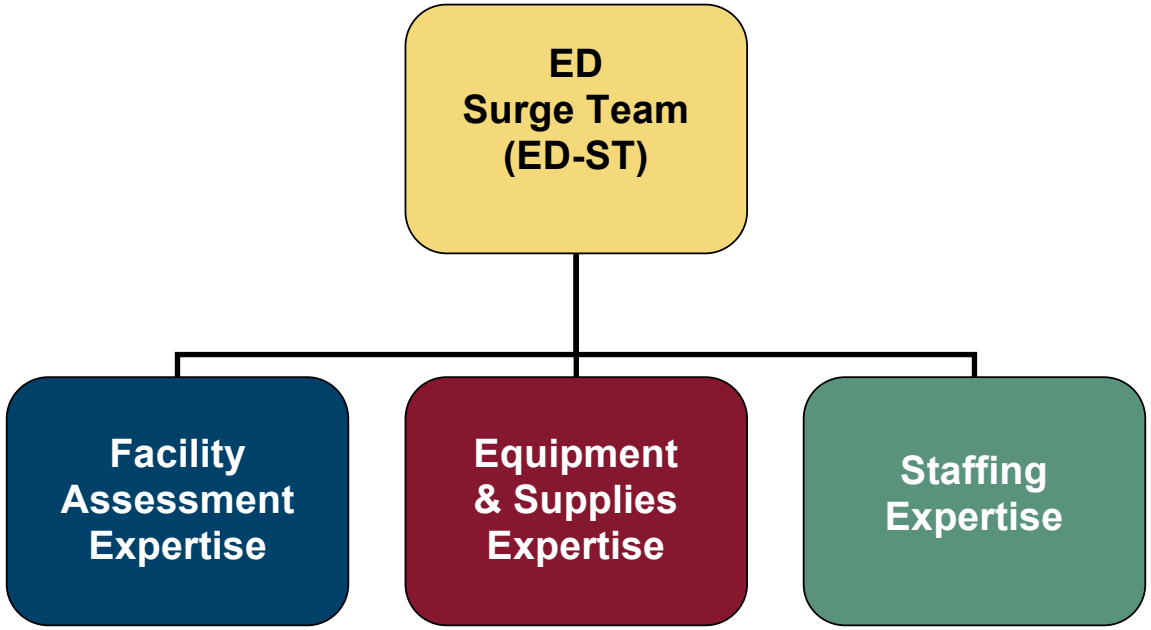
The Planning Document, pages 9-15, provides guidance on how to organize an *Emergency Department Surge Team* (ED-ST) in order to accomplish these critical activities most effectively; the Response Document on page 18 offers a series of action steps that will accomplish desired capacity expansion outcomes. In both cases, all activity either derives from or reports to the ED-ST - a group of healthcare professionals who are expert in emergency management and knowledgeable about capacity expansion in the Emergency Department.

Facilities, equipment/supplies, and staffing tools (and formulas) presented in the EDCET appendices should be carefully reviewed and customized to each hospital's specifications and requirements before use.

ED Capacity Expansion Tool
Summary Document - Planning

Organization Structure

EDCET work is overseen by the *ED Surge Team* (ED-ST). As illustrated in the graph below, the ED-ST's first task is to organize a core group of multidisciplinary subject matter experts to accomplish actions. Each expert is assigned the responsibility of producing a key element of the EDCET. The following pages will introduce the Planning functions of the *Emergency Department Capacity Expansion Tool* (EDCET).



ED Capacity Expansion Tool
Summary Document - Planning

Key Surge Planning Steps

1) **Create and convene** an ED Surge Team (ED-ST).
2) Using a *Facility Critical Needs Assessment Tool*, **evaluate possible expansion areas** *in and/*or *near the ED and how they will be used (i.e., screening, treatment)*. **Create/update** *Facility Planning Needs Checklists* for each identified/selected expansion area. **Compile** results into a *Facility Expansion Catalog*.
3) Using an *Equipment and Supply Needs Assessment Guide,* **evaluate** what equipment & supplies will be needed in expansion area. **Create** an *Equipment and Supply Checklist* for each identified/selected expansion area.
4) Using a *Staffing Needs Assessment Tool,* **determine** by category what additional professional and support staff will be needed in the expansion area(s). **Create** a list of possible activities for each professional and support group, and note if you would consider using MRC Volunteers where applicable.
5) **Update** hospital-specific *Policies & Procedures* to operationalize planning activities and considerations.

Hospitals are encouraged to customize the design and contents of EDCET templates to meet their institutional needs

Action	Phase	Step(s)	Outcome(s)
ONE ⇨ Convene an **ED Surge Team** (ED-ST) **ED-ST:** A core group of multidisciplinary clinical and administrative experts. ED-ST is charged with organizing and directing activities related to capacity expansion in accordance with hospital policies and procedures. Membership expands according to emergent need, and should include HICS representation. ED-ST leadership is provided by ED Administrative and/or ED Clinical management. **ED Surge Team (ED-ST)**	**Planning**	1) Create and convene an ED Surge Team (ED-ST), comprising multidisciplinary management experts in areas such as: ○ Facilities ○ Equipment & Supplies ○ Staffing ○ ED Operations (clinical/non-clinical) ○ Emergency Management. 2) Distribute EDCET to Team members, noting facility, equipment/supplies and staffing templates, pages 20-27. 3) Organize an ED-ST walk-through of clinical and non-clinical areas in and around the Emergency Department. Document results. Possible ambulatory and patient holding expansion areas could include: ○ Hallways ○ Lobbies and Public Areas ○ Physician Practices ○ Dining Rooms ○ Waiting Rooms ○ ED Pods (for admitted patients) ○ Outdoor space (tents) ○ Ambulance Bays	⇨ ED-ST provides a means to: ▪ Determine ongoing surge capacity potential by frequently monitoring all key patient activity areas in the ED. ▪ Recommend expanding capacity into pre-identified clinical and non-clinical areas. ▪ Oversee and monitor expanded capacity (ambulatory and admitted patients). ⇨ A walk-through will help to: ▪ Yield clinical expansion area possibilities. ▪ Yield non-clinical expansion area possibilities. ▪ Yield expansion areas that may be appropriate for ambulatory patients. ▪ Yield expansion areas that may be appropriate for admitted patients.

Action	Phase	Step(s)	Outcome(s)
TWO ⇨ Conduct a **Facility Review** of Possible ED Expansion Areas ○ Perform Facility Critical Needs Assessment(s) ○ Create Facility Planning Needs Checklist(s) ○ Create Facility Expansion Catalog **Facility Assessment**	**Planning**	1. Using the DOHMH-supplied *Facility Critical Needs Assessment* template, page 21, ED-ST members assess facility requirements for ambulatory and stretcher patients in expansion areas. Determine appropriateness of use for following activities: ▪ Screening and Triage ▪ Treatment ▪ Patient Holding (admitted patients without bed assignments) As necessary, develop this template's list to suit ED/hospital-specific planning needs. Note that these items should mirror the list found in the subsequent template – the *Facility Planning Needs Checklist* - so be certain to apply edits to both templates.	⇨ Completed *Facility Critical Needs Assessment* template provides a general guide to help emergency planners determine if/how specific expansion areas can be used for different clinical activities.
		2. Using the DOHMH-supplied *Facility Planning Needs Checklist*, page 21, ED-ST assesses the adequacy of each identified expansion area with regard to facility requirements and offerings. Indicate recommended use of space in the template's *Overall Assessment* section.	⇨ Completed *Facility Planning Needs Checklist* helps ED-ST assess facility requirements and offerings for each identified expansion area, including maximum patient capacities and appropriateness of use for clinical activities.
		3. Using the DOHMH-supplied *Facility Expansion Catalog*, page 22, ED-ST members compile a listing of all identified expansion areas, their seating and stretcher/bed capacities, and their appropriateness of use for different clinical activities.	⇨ Completed Facility Expansion Catalog provides a quick-reference guide to selected areas for ED expansion, including location information, patient capacities (seating/ stretchers), and appropriateness of use for clinical activities.

Action	Phase	Step(s)	Outcome(s)
THREE ⇨ Determine **Equipment & Supply Needs** for Selected Expansion Areas. ○ Complete Equipment & Supply Assessment Guide ○ Complete Equipment & Supply Checklist(s) **Equipment & Supplies**	**Planning**	1. Using the DOHMH-supplied *Equipment & Supply Needs Assessment Guide* template, page 24, ED-ST members determine equipment and supply needs for the clinical activities that may occur in identified ED expansion areas. As necessary, develop this template's list to suit ED/hospital-specific planning needs. Note that these items should mirror the list found in the subsequent template, the *Equipment & Supply Checklist*, so be certain to apply edits to both templates. 2. Using the DOHMH-supplied *Equipment & Supply Checklist* template, page 25, determine if ED/hospital has an adequate supply of items listed for each area under review. Also, note inventory amounts and storage locations of equipment and supplies for every identified ED expansion area.	⇨ Completed *Equipment & Supply Needs Assessment Guide* will: ▪ Provide planners with an at-a-glance reference of what equipment supplies are needed for to support the different expansion areas. ▪ Enable ED/Hospitals to order and inventory necessary equipment and supplies. ▪ Assist ED Management in monitoring usage of equipment and supplies when expansion areas are activated. ⇨ Completed Equipment & Supply Checklist(s) will: ▪ Provide planners with a quick-reference guide to available or needed equipment and supplies for each expansion area. ▪ Assist with ongoing monitoring of equipment/supply levels during emergencies.

Action	Phase	Step(s)	Outcome(s)
FOUR ⇨ Determine **Staffing Needs** for Selected Expansion Areas. ○ Staffing Plan **Staffing**	**Planning**	1. Using the DOHMH-supplied *Staffing Plan* template, page 27, ED-ST members assess how the selected expansion areas will need to be staffed. 2. Complete Staffing Plans for each expansion area, noting: ○ FTE requirements ○ Tasks and Responsibilities ○ MRC Volunteers	⇨ Completed Staffing Tool provides planners with an overview of clinical and support staffing requirements for each expansion area.

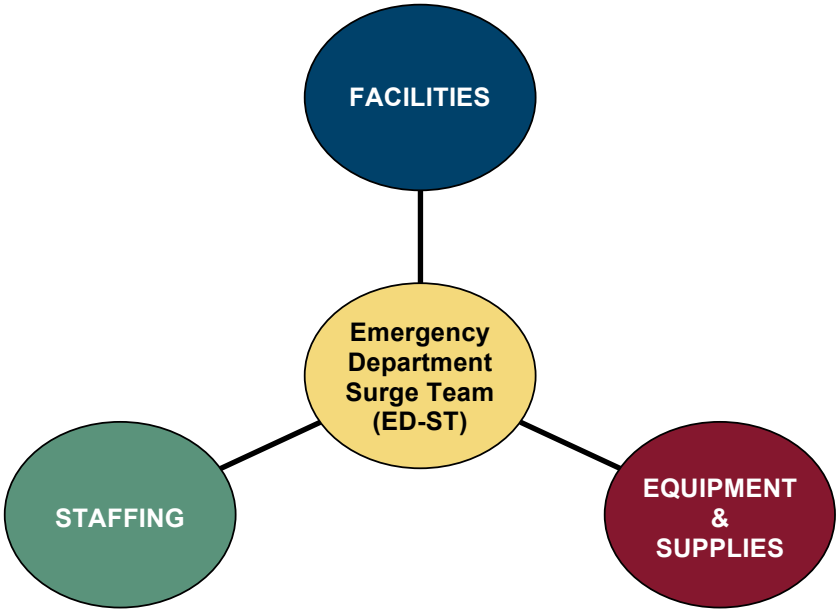
Action	Phase	Step(s)	Outcome(s)
FIVE ⇨ Incorporate EDCET Planning into **Hospital Policies & Procedures**.	**Planning**	1. ED-ST creates/updates internal Policies & Procedures to reflect ED surge expansion planning into areas in and (preferably) nearby the Emergency Department.	⇨ Incorporating ED capacity expansion activities into internal (departmental/ corporate) policies and procedures will provide a useful ongoing reference for staff, and a guide to help operationalize expansion planning elements in an emergency.

ED Capacity Expansion Tool
Summary Document - Response

Introduction and Overview

Whereas the *Planning* section of the EDCET is concerned primarily with constructing an organizational structure around which the Emergency Department Surge Team (ED-ST) members can prepare and recommend key capacity expansion activities, the *Response* section deals with the actual implementation of those actions. In both cases, all activity either derives from or reports to the ED-ST – a team of healthcare professionals who are expert in emergency management and knowledgeable about patient discharging and capacity expansion.

The following Response Document will introduce surge capacity planners to the Response functions of the Emergency Department Capacity Expansion Tool (EDCET).



ED Capacity Expansion Tool

Summary Document - Response

Key Surge Response Steps

1) **Convene** ED Surge Team (ED-ST) and review completed Facility Expansion Catalog.
2) **Assure** adequacy of selected expansion area(s) using completed Facility Planning Needs Checklist(s).
3) **Assess** current and anticipated need for equipment and supplies in selected expansion area(s) using completed Equipment & Supply Checklist(s).
4) **Review** completed Staffing Plan(s) for selected expansion area(s).
5) **Keep** ICS and Hospital Administration informed regarding expansion activities and needs. **Refer** to Departmental/Hospital policies and procedures regarding expansion activities.

Action	Phase	Step(s)	Outcome(s)
ED Surge Team (ED-ST)	**Response**	☐ **Convene** ED-ST when need for expansion surfaces. Review completed ***Facility Expansion Catalog*** to weigh expansion options against patient volume and type of services needed. Monitor ongoing.	⇨ Response team selects expansion area(s) from *Facility Expansion Catalog* to accommodate increase in patient volume.
Facility Assessment		☐ **Assure** appropriateness of selected expansion areas. Use completed ***Facility Planning Needs Checklist(s)*** to assess areas against their intended use before activating expansion plans.	⇨ Response team confirms each expansion area's appropriateness by referencing their respective *Facility Planning Needs Checklists*.
Equipment & Supplies		☐ **Assess** current and anticipated need for equipment and supplies in selected expansion areas. Use completed ***Equipment & Supply Checklist*** for each area and closely monitor ongoing.	⇨ Response team confirms adequacy of each expansion area's equipment and supply needs by referencing their respective *Equipment & Supply Checklists*.
Staffing		☐ **Review** completed ***Staffing Plan(s)*** for selected expansion area(s). Take necessary steps to provide clinical and non-clinical staff coverage.	⇨ Response team uses expansion area's *Staffing Plans* to request additional clinical and support staff.
Administrative	**Response**	☐ **Keep** ICS (if activated) informed regarding your expansion activities and needs. ☐ **Keep** Hospital Administration fully informed of activities and needs. ☐ **Refer** to Departmental/Hospital Policies and Procedures regarding expansion activities.	⇨ Close communication with emergency and administrative response authorities will result in greater levels of support for expansion activities.

ED Capacity Expansion Tool
Appendices
Introduction

OVERVIEW

Appendices are included in the Emergency Department Capacity Expansion Tool (EDCET) to help emergency managers complete the capacity expansion planning and response action steps with correlating tools and templates, all of which are customizable to ED/hospital-specific needs.

APPENDICES DEFINED

Appendices A through C relate to capacity expansion into areas in or (preferably) nearby the Emergency Department. Appendix **A** offers three facility templates that encourage emergency planners to assess the appropriateness (for different clinical activities) of possible expansion areas. For selected areas, findings are then recorded in a provided catalog. This is followed by Appendix **B**, which has a set of two Equipment and Supply templates. The first challenges planners to review and, if necessary, complete a list of equipment and supplies that would be needed to make patients comfortable and staff able to conduct specific clinical activities in the expansion areas. The second template acts as a check sheet to evaluate each area's needs against that list. Finally, Appendix **C** offers a Staffing Plan that will encourage planners to assess staffing coverage, tasks and responsibilities, and MRC preferences for each expansion area under review.

Working spreadsheets of all EDCET tools are downloadable at:
http://www.nyc.gov/html/doh//html/em/emergency-surge.shtml

ED Capacity Expansion Tool

Appendix A
Facilities

Strategies & Tactics - Facilities

- The decision to occupy non-clinical space will take time to execute and will need to have decanting and relocation plans for services that are displaced during the public health emergency. This is a critical consideration if displaced services have the potential to impact business continuity.
- Include in your planning a response plan for the removal of existing office furniture and supplies and the deployment of requisite equipment and supplies identified for the care of patients.

COMPLETION STEPS

1. Conduct an Emergency Department Surge Team (ED-ST) walk-through of possible ED expansion areas (see page 11). Using the *Facility Critical Needs Assessment Tool* template, determine what facility considerations are essential to the clinical activities that will be conducted in expansion areas. An example is provided (page 21). Customize the template as appropriate to your ED/Hospital-specific needs.
2. Before working on the next tool (the *Facility Planning Needs Checklist*), be certain that any changes made to the *Assessment Tool* are carried over to the *Needs Checklist* so that both tools' lists mirror each other.
3. Then use the *Facility Planning Needs Checklist* template to assess the adequacy of each identified expansion area, indicating your recommendation for which clinical activities that space is best suited. One example is provided on page 21 and you will find 2 more in the accompanying workbook (see downloadable link on page 19).
4. Next, catalog your selected expansion area(s) in the Facility Expansion Catalog on page 22 (example given).

EXAMPLE

NYC DOHMH SURGE CAPACITY EXPANSION TOOL

1. Facility Critical Needs Assessment Tool
for Emergency Department Capacity Expansion

DRAFT

	Screening & Triage	Treatment	Adult Admissions	Peds Admissions
Adaptability/Conversion of Space			◆	◆
Bathrooms / Hand Washing Availability	◆	◆	◆	◆
Emergency Power	◆	◆	◆	◆
HVAC Considerations	◆	◆	◆	◆
Medical Gases		◆	◆	◆
Monitors		◆	◆	◆
Negative Pressure			◆	◆
Stretcher Accessible		◆	◆	◆
Suction		◆	◆	◆
Utilities / Communication / IT Ports	◆	◆	◆	◆
Work Space	◆	◆	◆	◆

EXAMPLE

2. Facility Planning Needs Checklist
for Emergency Department Capacity Expansion

DRAFT

Expansion Area & Location: Bldg C Lobby

Maximum Capacity: 29 (Wait Chairs)

Name / Title of Assessor: L. Jones / Nurse Manager | **Date:**

	Need	Do NOT Need	N/A	Notes
Adaptability/Conversion of Space		X		
Bathrooms / Hand Washing Availability	X			
Emergency Power	X			
HVAC Considerations	X			
Medical Gases		X		
Monitors		X		
Negative Pressure		X		
Stretcher Accessible		X		
Suction		X		
Utilities / Communications / IT Ports	X			
Work Space	X			

Note: Overall Assessment	Screening & Triage	Treatment	Adult Admissions	Peds Admissions
This Space can be used for:	X			

EXAMPLE

NYC DOHMH SURGE CAPACITY EXPANSION TOOL

3. Facility Expansion Catalog

for **Emergency Department Capacity Expansion**

DRAFT | ED- Capacity Expansion

EXPANSION AREA	# of Waiting Chairs	# of Beds	Screening & Triage	Treatment	Adult Admissions	Peds Admissions
MILD Influenza Like Illness (ILI)						
Bldg C Lobby	29	0	X			
Atrium Dining Room	14	14	X	X	X	X
Total - Mild	**43**	**14**				
MODERATE to SEVERE ILI						
ED Pod "A", Adult Admissions	0	12		X	X	X
Total - Moderate to Severe	**0**	**12**				
Total - Mild to Severe	**43**	**26**				

ED Capacity Expansion Tool

Appendix B
Equipment & Supplies

Strategies & Tactics - Equipment & Supplies

- Equipment and supply par levels should be developed for identified capacity expansion areas, either to supplement current supplies that are routinely utilized in the area, or as separate lists.
- Plan for providing the clinical function in the space for a protracted time period.
- Consider using generic, fully-stocked disaster carts for use at any location.
- Identify existing equipment and supply resources that are already available in the space. Make sure to assess whether these resources will be removed by the function that is being displaced.
- Determine the potential sources of necessary equipment and supplies:
    - Operational inventory, disaster stockpile or MOU (delayed delivery)

COMPLETION STEPS

1. Use the *Equipment & Supply Needs Assessment Guide* to determine what equipment and supplies are required to support the different clinical activities that will occur in expansion areas. An example is provided on page 24. Customize the template as appropriate to your ED/Hospital-specific needs.
2. Before working on the next tool (the *Equipment & Supply Checklist*), be certain that any changes made to the *Assessment Guide* are carried over to the *Checklist* so that both tools' lists mirror each other.
3. Then complete the *Equipment & Supply Checklist* template to assess the equipment and supply adequacy of each selected expansion area. An example is provided on page 25.

EXAMPLE

NYC DOHMH SURGE CAPACITY EXPANSION TOOL

DRAFT

1. Equipment & Supply Needs Assessment Guide
for Emergency Department Capacity Expansion

	Screening & Triage	Treatment	Adult Admissions	Peds Admissions
BP Machines	◆	◆	◆	◆
Cardiac Monitors - stationary and portable		◆	◆	◆
Chairs (Waiting)	◆	◆		
Communication Equipment (phones, IT ports)	◆	◆	◆	◆
Crash Cart		◆	◆	◆
Documents (downtime/back-up)	◆	◆	◆	◆
Food Refrigerators		◆	◆	◆
Hand Cleaner	◆	◆	◆	◆
HEPA Unit - Portable			◆	◆
Information Technology	◆	◆	◆	◆
Information Technology	◆	◆	◆	◆
IV Poles / Pumps		◆	◆	◆
Linens (clean & soiled)		◆	◆	◆
Medication (incident-specfic)		◆	◆	◆
PCA Pumps		◆	◆	
Patient Gowns		◆	◆	◆
Personal Protective Equip. (PPE)	◆	◆	◆	◆
Portable 0_2		◆	◆	◆
Portable Suction		◆	◆	◆
Portable X-ray		◆	◆	◆
Refrigerator (medication)		◆	◆	◆
Refrigerator (patient food)		◆	◆	◆
Regulated Waste Container	◆	◆	◆	◆
Sharps Container		◆	◆	◆
Stretchers	◆	◆	◆	◆
Supply Carts		◆	◆	◆
Temperature	◆	◆	◆	◆
Ventilators - Portable		◆	◆	◆
Wheelchairs	◆	◆	◆	◆

EXAMPLE

NYC DOHMH SURGE CAPACITY EXPANSION TOOL

2. Equipment & Supply Checklist

for **Emergency Department Capacity Expansion**

DRAFT

Unit / Expansion Area & Location: Bldg C Lobby

Maximum Capacity: 29 (Wait Chairs)

Name / Title of Assessor: L. Jones/Nurse Manager ***Date:***

	Have It	Need It	N/A	Quantity	Storage Location	Notes
BP Machines	X			2		Plus 9 additional w cardiac monitors
Cardiac Monitors stationary and Portable			X			Plus 2 portable
Chairs (Waiting)		X		19	Basement	Need to identify add'l 10 chairs
Communication Equipment (Phones, IT Ports)	X					Communication adequate for space; includes wireless router
Crash Cart			X			
Documents (downtime/back-up)	X					Clerks have 65 downtime reg kits
Hand Cleaner	X			25 Boxes	Back closet	Adequate for the space and its use
HEPA Unit - Portable			X			
Information Technology		X		1		portable pt reg system
IV Poles / Pumps			X			
Linens (clean & soiled)			X			Additional Linen available from Linen Services
Medication (incident-specific)			X			
PCA Pumps			X			
Patient Gowns			X			Additional Pt. Gowns available from Linen Services; call as needed.
Personal Protective Equip. (PPE)	X			25 bx N95; 21 bx masks		Additional PPE in Med Dir's office; can be requested when needed.
Portable 0_2			X			
Portable X-ray			X			
Refrigerator (medication)	X					
Refrigerator (patient food)	X					call Food Services to initiate deliveries
Regulated Waste Container	X					
Sharps Container			X			
Stretchers		X				Available as need - call Shift Supervisor
Suction - stationary and portable			X	20		call Shift Supervisor
Supply Carts			X			
Temperature	X					In addition to 4 Each cardiac monitor has temp capabilities
Ventilators - Portable			X	5		Stored in respiratory and can be deployed where needed
Wheelchairs	X					Available as needed - call Shift Supervisor

ED Capacity Expansion Tool

Appendix C
Staffing Plan

COMPLETION STEPS

1. Use the *Staffing Plan template* to determine coverage needs (clinical and support) in each of the selected expansion areas. An example is provided on page 27. Customize the template as appropriate to your ED/Hospital-specific needs.
2. Consider and document tasks and responsibilities for each category of staff, and whether or not you would consider using a Medical Reserve Corps volunteer to assume those responsibilities (where applicable).

EXAMPLE

NYC DOHMH SURGE CAPACITY EXPANSION TOOL

1. Staffing Plan

for **Emergency Department Capacity Expansion**

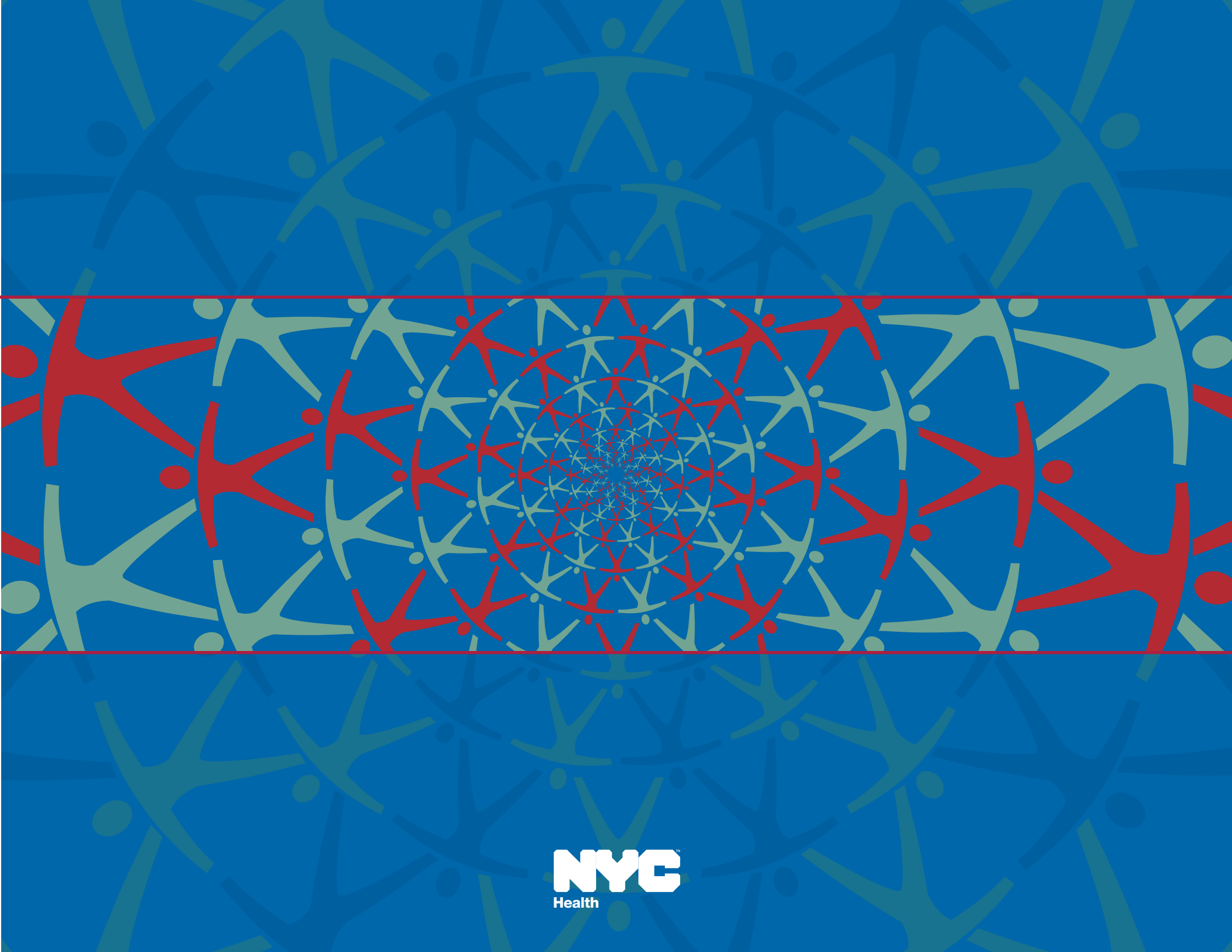
DRAFT

Unit / Expansion Area & Location:

Maximum Capacity:

Name / Title: ***Date:***

Professional Category	FTEs Required per Day Shift (M-F)	FTEs Required per Off-Hours Shift	Tasks & Responsibilities	MRC Volunteer Acceptable (Y/N)?	Notes
Physician - Attending			Treat and Release; Triage - Acute Patient Care; Practice under Emergency Preparedness Standards.		
Physician - Resident			Treat and Release; Triage - Acute Patient Care; Practice under Emergency Preparedness Standards.		
Physician - Assistant			Treat and Release; Triage - Acute Patient Care; Practice under Emergency Preparedness Standards.		
Nurse - Practitioner			Triage - Acute Patient Care; Practice under Emergency Preparedness Standards.		
Nurse - RN			Triage - Acute Patient Care; Assist Head Nurse; Screening (flu symptoms)		
Nurse - LPN			Activities of Daily Living (ADL); Ancillary Services		
Ancillary - Respiratory Theapist			Respiratory Rx; Ancillary Services; Respiratory Care; Assisting with Treatments		
Ancillary - Nurse's Aide			ADL; Ancillary Services; Assisting Nursing Function		
Ancillary - Clerk			Administrative	n/a	
Ancillary - Registrar			Patient Tracking; Patient Registration	n/a	
Ancillary - EMT/P			n/a	n/a	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