



Checklist to support COVID-19 outbreak management in acute healthcare setting (formerly Appendix 4 of acute guidance document)

Number	Checklist points	Check/Note
Section A. Informing Key Stakeholders & Notification of outbreak		
A1	Arrange relevant internal communication	
A2	Notify Public Health	
A3	Involve Occupational Health	
Section B. Surveillance		
B1	Convene Outbreak Control Team (General Manager or Deputy)	
B2	Ensure up to date surveillance data is available	
B3	Ensure rapid lab confirmation of COVID-19 is available	
Section C. Testing and Patient Placement		
C1	Consider if ward closure is necessary	
C2	Review patient isolation/cohorting arrangements	
C3	Consider individual patient needs	
C4	Provide dedicated equipment as required	
C5	Implement enhanced surveillance and testing as appropriate.	
C6	Identify all in hospital contacts (patients and staff)	
C7	Ensure all patients contacts still in hospital are appropriately informed and managed	
C8	Ensure all staff contacts are appropriately informed and managed	
C9	Ensure public health are informed of all discharged contacts and highlight any discharged to residential care facilities	
Section D. Patient Movement		
D1	Review patient movements	
D2	Limit patient transfers	
D3	Ensure transfers to other facilities are planned and communicated	
D4	Where appropriate inform other relevant stakeholders e.g. other hospitals within the group, Hospital Group, Acute Operation relevant Community Health Organisations (CHOs)	
Section E. Resources, Education and Training		
E1	Ensure adequate PPE stocks and ABHR available.	
E2	Review staffing levels	

E3	Confirm staff are trained in appropriate use of PPE	
E4	Assess hand hygiene training and compliance	
E5	Assess PPE training and compliance	
E6	Provide real time feedback on performance to staff	
Section F. Communication with staff		
F1	Ensure staff members are aware of outbreak and measures to control it	
F2	Ensure appropriate on-ward signage available	
F3	Ensure appropriate signage at ward entry	
F4	Ensure staff are reporting on fitness to work on arrival for each shift	
F5	Ensure staff are aware of reporting pathways if symptomatic	
Section G. Communication patients, visitors and public		
G1	Ensure patients and or relevant persons are informed promptly	
G2	Ensure visitors are aware of outbreak and associated risks	
G3	Ensure essential visitors are supported in hand hygiene and use of PPE	
G4	Ensure appropriate communication with wider community	
Section H. Communication between healthcare facilities on transfer/discharge		
H1	Appropriate pathways for communication in place.	
H2	Information provided on discharge letters to GP and others as required	
Section I. Environmental Hygiene		
I1	Hygiene services on OCT	
I2	Review and monitor cleaning practices for both equipment and environment in line with guidelines	
Section J. Environment		
J1	Designated areas for donning and doffing	
J2	PPE is easy to access and properly stored	
J3	Unnecessary equipment removed	
J4	Equipment for decontamination stored appropriately.	

J5	Review measures to promote physical distancing within hospitals in particular in staff communal areas for example changing rooms, restaurants etc.	
Section K. Visitors and traffic control		
K1	Advise visitors of visiting restrictions	
K2	Review non-essential services	