CHECKLIST FOR INFECTIOUS DISEASES WHICH ARE SUBJECT TO QUARANTINE

Objective Goals: To ensure rapid identification of anyone with a highly infectious disease which may require quarantine. To ensure appropriate implementation of infection control practices specifically pertinent to diseases which require quarantine. To ensure that public affairs/risk communication initiatives are embedded into the Infectious Disease guidance.

| Surveillance and Triage | Yes | No |
|---|-----|----|
| | | |
| Does the MTF Plan specify strategy for screening and active | | |
| surveillance (e.g., efforts aimed at early detection of any infectious | | |
| disease)? | | |
| Does the MTF Plan address the importance of setting up triage clinics to | | |
| evaluate people who are concerned that they may have early symptoms of infectious disease? | | |
| Does the Plan specify guidance on screening incoming travelers from | | |
| infectious disease affected areas and providing them with measures on | | |
| monitoring their health and reporting illness? | | |
| In the absence of known infectious disease, does the MTF Plan avail themselves of the information through CHPPM, Directorate of | | |
| Epidemiology and Disease Surveillance or Global Emerging Infections | | |
| System (GEIS), Local Health Department as well as Center for Disease | | |
| Control and Prevention (CDC)? | | |
| Does the MTF Plan provide for a designated area in waiting rooms | | |
| where patients with respiratory symptoms can be segregated (ideally by | | |
| at least 3 feet)? | | |
| , | | |
| Patient Care | | |
| Does the MTF Plan have a written provision stating the rapid and | | |
| efficient identification of infectious cases and their close contacts, and | | |
| isolation of all potential infectious patients? | | |
| Does it specify the importance of basic infection control practices and | | |
| contact tracing to interrupt infectious disease transmission? | | |
| Does the MTF Plan provide strategies to meet the range of staffing | | |
| needs that might be required to manage an infectious disease outbreak? | | |
| Does the Plan identify staffing requirements for response teams (e.g., | | |
| Epidemiology, Vaccination, Health Care Providers, Lab, Logistics, | | |
| Security)? | | |
| Does it specify strategies to evaluate current availability of | | |
| infrastructure requirements (e.g., adjustment to existing buildings and | | |
| identification of buildings to use for quarantine)? | | |
| Does the MTF Plan have tools and mechanism to prevent stigmatization | | |
| and provide mental health resources for those in isolation and | | |
| quarantine? | | |
| Does the MTF Plan have community partners to ensure that | | |

| implementation and communication address the cultural and linguistic | |
|---|---|
| needs of affected persons? | |
| Does the Plan ensure availability of maximum numbers of functioning | |
| negative airflow rooms for hospitalizing patients with infectious | |
| disease? | |
| | |
| Laboratory | |
| Does the MTF Laboratory have the surge capacity to rapidly mobilize to | |
| meet an increased demand (e.g., large quantities of medications and | |
| medical supplies from the Strategic National Stockpile)? | |
| Does the MTF Laboratory have increased numbers of biological safety | |
| cabinets dedicated in the event of a surge? | |
| Does the Plan identify surge capacity for laboratory testing in the event | |
| of a large infectious disease outbreak? | |
| Does the Plan identify surge capacity for laboratory testing in the event | |
| of a large infectious disease outbreak? | |
| Does the MTF Plan provide guidance to ensure that laboratory | |
| personnel are trained on shipping procedures, maintaining inventories, | |
| and certified in shipment of hazardous substances including infectious | |
| agents and maintain re-certification every 2 years? | |
| | |
| Occupational Health Care | |
| Does the MTF Plan have a Respiratory Protection Program (e.g., | |
| medical clearance of personnel and appropriate occupational record | |
| keeping)? | |
| Does the MTF Plan provide specific training for Health Care Providers, | |
| Responders, and Housekeeping staff in anticipation of any infectious | |
| disease presenting to MTF or outlying clinic (e.g., fit testing of Personal | |
| Protective Equipment – NIOSH approved N95 particulate respirators)? | |
| Does the Plan include management and follow-up of exposed Health | |
| Care Providers? | |
| | |
| Communication/Public Affairs | |
| Does the MTF Plan request for Garrison and MTF CDRs and other | |
| designated key stakeholders to establish a community forum to | |
| communicate situational status/updates, gate coverage etc.? | |
| Does the Plan provide response to frequently occurring media questions | |
| by preparing basic Fact Sheets for the public (e.g., | |
| www.cdc.gov/infectious, talking points, and question-and-answer | |
| documents)? | |
| Does the Plan provide educational information for children and their | |
| parents and individuals with special needs on how to prevent spread of | |
| infectious disease (e.g., posters covering their mouth when coughing | |
| and washing their hands)? | |
| Is the educational information for children reviewed and approved by a | |
| Pediatrician? | |
| | • |

| Does the MTF Plan request for coordination, /assignment of Public Affairs Officer or Public Health Emergency Officer (PHEO) to interface with the local Public Health for assistance to inform and educate | |
|---|--|
| relevant audiences regarding public health threats and preventive measures with the goal of minimizing panic and rumors? | |
| measures with the goal of minimum grants and tamers. | |
| Legal Considerations | |
| Does the Plan specify the legal considerations for a quarantine of military, GS, Contractor, and public personnel on Post, to include family members, and is it thoroughly addressed and communicated to all to include the Garrison CDR and the PHEO/MTF CDR? | |
| Building System-Related Considerations | |
| Is there a coordination between the MTF CDR, Garrison CDR, and IMA to address the following with Installation Facility Chief: 1. Low-Cost/No-Cost considerations focus on using existing bldg systems in Garrison that will effectively minimize nosocomial infections? | |
| 2. Immediate considerations primarily classified as adjustments to existing bldg systems?3. Long-Term bldg system alteration requiring construction time and may require design time? | |
| Joint Planning | |
| Does the MTF Plan provide for internal/external (e.g., IMA, Garrison Commander, local Health District) multidisciplinary committee meeting with responsibility and authority for infectious disease preparedness and response? | |
| Does the Plan specify MTF coordination with the Installation Medical Authority, Garrison CDR and his staff, on identifying facilities that could serve as expanded military treatment facilities in the event of a surge of patients with symptoms of an infectious disease? | |
| Does the MTF Plan specify coordination with Garrison CDR, Provost Marshal and other stakeholders for the physical security of property and personnel as well as enforcement of quarantine movement restriction requirements (e.g., control of access to MTF if command decisions are made to limit the admissions or transfers of patients, or to limit visitors and/or gate guard needing mask, waterless hand washing)? | |
| Quality Assurance | |
| Once an exercise or real life scenario has been completed, does the MTF have the following: an After Action Report, list of deficiencies with corrective actions and timelines? | |
| Does the Plan provide information on the Monitoring of Emergency Preparedness Plan? | |

| Your plan has the following deficiencies: | | | | | | |
|---|--|--|--|--|--|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Green: 90-100% (40-59 with yes response)
Amber: 70-89% (20-39 yes)
Red: 69% & below (<20 yes)