

# Attachment A

## MCF Activation Sequence

### Definitions:

Lead agency for planning: That agency which develops the plans and protocols for local MCF operation within a community.

Lead agency for activation: That agency that takes on management responsibility once an MCF is opened.

1. NDDoH DOC approves Standard of Care Level III (or specific hospital requests community access to assisted living function (for recovering pandemic patients without home care provider) in order to delay movement to Stage III care).
2. NDDoH DOC notifies regional EPRs that community preparations should be initiated for opening MCFs.
3. Designated lead agency for planning\* for each MCF meets with identified site commanders\* to plan local community actions.
4. A facility setup lead person is assigned responsibility for setup of facility.
5. Site commanders work with lead agency for activation to define minimal management staffing and to prioritize additional management positions to fill in order to reach desired fixed staffing level for each MCF. Lead agency for planning will serve as a technical consultant.
6. Specific individuals are assigned into management staff positions, but a specific staffing schedule is not developed until first date of operation is determined.  
NOTE: For minimum staffing, because of training requirements and need for daily continuity of operations, seven management positions should be assigned three deep (site commander, medical director, safety and security, patient care coordinator, patient transportation coordinator, support and resource leader, infrastructure leader). All other positions can be filled by rotating volunteers.
7. Identify chaplaincy services.
8. Site management personnel are trained by pre-designated training agent\* using management training curricula\*.
9. Public request is released for lay volunteers needed to perform patient care and management support staffing. Facility staffing may be light initially and increased as patient load increases.
10. Building MOU\* is activated.
11. Site is setup including:
  - a. Acquisitions and staging of beds
  - b. Setup of IT, communications and office space
  - c. Receipt and storage of supplies
  - d. Designation and labeling of room functions
  - e. Labeling of patient flow, entrance and exit sites
  - f. Duplication of forms
12. Facility setup lead notifies local DOC that it is ready to receive MCF setup shipment of medical supplies. Local DOC notifies the NDDoH DOC.
13. Initially required quantities of resources to be obtained locally are secured and setup of facility is initiated using both local and state resources.
14. Facility setup lead notifies NDDoH DOC that facility is ready to receive patients.

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15. Hospital provides 24 hour lead time before MCF is needed.
16. Facility setup lead or designee sets up initial week staffing schedule for all positions and notifies all individuals (all management staff and volunteers) when they are scheduled to work.
17. Volunteer staff are trained in duties prior to receipt of first patient.
18. Designated lead agency designates oversight group that will periodically review care and ensure ethical treatment of patients.
19. Contract services\* are activated.
20. First patient arrives.

\* Planning step which needs to be completed pre-pandemic