

2024 Safety Officer Inspection Form

Infectious Disease

Name _____

Date _____

<p>INCIDENT COMMAND</p> <ul style="list-style-type: none"> <input type="checkbox"/> Delegation of Authority covers Infectious Disease <input type="checkbox"/> Notification Protocol for Infectious Disease symptoms <input type="checkbox"/> Example of P.A.C.E. model for C&G member displaying symptoms <input type="checkbox"/> IWI plan valid for current incident 	<p>SAFETY</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adequate social distancing provisions in place at Incident Base (Briefings) <input type="checkbox"/> Separate SOF for lead Infectious Disease symptoms team (if applicable) <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered <input type="checkbox"/> IWI plan valid for current incident <input type="checkbox"/> Valid Infectious Disease Medical Plan (MEDL)
<p>FINANCE</p> <ul style="list-style-type: none"> <input type="checkbox"/> Coordinate a process with Comp Claims <input type="checkbox"/> Documentation of CA1/ line of duty injury <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered 	<p>LIAISON</p> <ul style="list-style-type: none"> <input type="checkbox"/> Notification Protocol- local agency administrator, home unit of patient, IMT IC and local health department <input type="checkbox"/> Hospital Liaison point of contact identified
<p>PLANS</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered <input type="checkbox"/> Adequate social distancing provisions in place (social distance markers & signage) 	<p>STATUS CHECK IN/DEMOB</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adequate social distancing provisions in place (social distance markers & signage) <input type="checkbox"/> Remote check in/demob protocol in place (if applicable)
<p>OPERATIONS</p> <ul style="list-style-type: none"> <input type="checkbox"/> Coordinate the need for remote camps <input type="checkbox"/> Adequate social distancing provisions in place for briefings at remote camps <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered 	<p>AIR OPERATIONS</p> <ul style="list-style-type: none"> <input type="checkbox"/> Coordinate decontamination of aviation transportation vehicle protocol (if applicable) <input type="checkbox"/> Adequate social distancing provisions in place for briefings at Helibase/Tanker Base <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered
<p>PUBLIC INFORMATION</p> <ul style="list-style-type: none"> <input type="checkbox"/> Coordinate Incident protocols with Media <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered 	
<p>LOGISTICS</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered <input type="checkbox"/> Valid Infectious Disease Medical Plan 	<ul style="list-style-type: none"> <input type="checkbox"/> Adequate social distancing provisions in place for media (social distance markers & signage) <input type="checkbox"/> Example of P.A.C.E. model for Logistics Section staffing <input type="checkbox"/> IWI plan valid for current incident
<p>SPIKE CAMPS</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adequate social distancing provisions in place for operations & briefings at remote camps (social distance markers & signage) <input type="checkbox"/> Facility cleaning and disinfecting log for high touch community areas (hand rails, door knobs, tables and chairs etc) <input type="checkbox"/> No self-serve food or drink stations 	<p>SLEEPING TRAILERS</p> <ul style="list-style-type: none"> <input type="checkbox"/> Facility cleaning and disinfecting log for high touch community areas (hand rails, door knobs, beds and shelves etc) <input type="checkbox"/> Adequate social distancing provisions in place (social distance markers & signage)

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<p>MEDICAL UNIT</p> <ul style="list-style-type: none"> <input type="checkbox"/> Separate MEDL lead for Infectious Disease symptoms <input type="checkbox"/> Separate MEDL/location for Infectious Disease symptoms <input type="checkbox"/> Follows current CDC/Agency guidelines relevant to patients <input type="checkbox"/> Coordinate protocols for resource check in/demob screening 	<ul style="list-style-type: none"> <input type="checkbox"/> Medical Transportation Plan (Infectious Disease specific) <input type="checkbox"/> Contact local county health department for notification and testing protocol <input type="checkbox"/> Contact Tracing form available (local Dept of Health) <input type="checkbox"/> Decontamination plan of transportation vehicles <input type="checkbox"/> Review facility cleaning and disinfecting log for high touch community areas (hand rails, Door knobs, etc) <input type="checkbox"/> Record patient information for CA1 <input type="checkbox"/> Hospital availability (daily verification)
<p>FACILITY UNIT</p> <ul style="list-style-type: none"> <input type="checkbox"/> Controls in place to limit public access <input type="checkbox"/> Infectious Disease signage in place throughout Incident Base <input type="checkbox"/> Quarantine location (labeled area) <input type="checkbox"/> Isolation Location (labeled area) <input type="checkbox"/> Security (for isolation area) <input type="checkbox"/> Adequate social distancing provisions in place for briefings (social distance markers & signage) 	<ul style="list-style-type: none"> <input type="checkbox"/> Toilets/Showers dedicated to Isolated/quarantined personnel <input type="checkbox"/> Community (high touch area) office area cleaning schedule/log <input type="checkbox"/> Food plan/coordination for isolated personnel <input type="checkbox"/> Coordination with vendors for cleaning and disinfecting of facility <input type="checkbox"/> Hotel Management/Facility spot check
<p>GROUND SUPPORT</p> <ul style="list-style-type: none"> <input type="checkbox"/> Operator and Vehicle <u>only</u> (per inspection) <input type="checkbox"/> Plan in place for wellness check for incident assigned Drivers (Potential High Contact Exposure) <input type="checkbox"/> Adequate Infectious Disease PPE supplies on hand or ordered 	
<p>SUPPLY UNIT</p> <ul style="list-style-type: none"> <input type="checkbox"/> System in place for limited or no touch transfer of supplies <input type="checkbox"/> Protocol in place for backhaul (sanitize, decontaminate, limited or no touch transfer of supplies) <input type="checkbox"/> Adequate social distancing provisions in place (social distance markers & signage) 	<p>LAUNDRY UNIT</p> <ul style="list-style-type: none"> <input type="checkbox"/> System in place for limited or no touch transfer of clothing <input type="checkbox"/> Adequate social distancing provisions in place (social distance markers & signage)
<p>SHOWER UNITS</p> <ul style="list-style-type: none"> <input type="checkbox"/> Larger location required for social distancing <input type="checkbox"/> Adequate social distancing provisions in place (social distance markers & signage) <input type="checkbox"/> Facility cleaning and disinfecting log for high touch community areas (hand rails, door knobs, showers etc) 	<p>FOOD SERVERS & SERVING AREA</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adequate social distancing provisions for food distribution areas (social distance markers & signage) <input type="checkbox"/> No self-serve stations <input type="checkbox"/> No dining areas provided, prepared for dispersed eating <input type="checkbox"/> Facility cleaning and disinfecting log for high touch community areas

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