**COVID-19 cRISIS STAFFING CHECKLIST**

*Updated: October 27, 2020*

The State Emergency Operations Center (SEOC) may be able to assist your organization with emergency staffing needs related to COVID-19. Before inquiring with the SEOC, be sure you have first documented your attempts to resolve staffing independently. See the checklist below to ensure you have exhausted all options.

* Called all causal staff.
* Implement expedited training practices for new hires (see the Basic Care Aide and Paid Feeding Assistant expedited curriculum.
* Reallocated staff internally; shifted staffing assignments and caregiver ratios.
* Trained and deployed alternative staff as caregivers (see the Basic Care Aide curriculum). Staff to consider include:
	+ Office staff
	+ Administration
	+ Therapy staff
	+ Culinary staff
	+ Maintenance staff
	+ Activities staff
	+ Corporate staff
* Contacted sister organizations for staffing assistance.
* Contacted neighboring long-term care and homecare organizations for staffing assistance.
* Contacted local hospitals, clinics, health systems for staffing assistance.
* Contacted local CareerForce or other job placement agencies.
* Contacted local nursing schools or nursing assistant training programs.
* Contacted local emergency and public health resources including:
	+ [Emergency management options through your county](https://dps.mn.gov/divisions/hsem/contact/Pages/county-emergency-managers.aspx)
	+ Your County’s Medical Reserve Corps at 651-201-5700 or minnesotaresponds@state.mn.us
	+ [Regional Health Care Preparedness Coordinators](https://www.health.state.mn.us/communities/ep/coalitions/rhpc.html)
	+ [Public Health Preparedness Coordinators](https://www.health.state.mn.us/about/org/ch/epr/phpc/index.html);
	+ State Healthcare Coordination Center (SHCC) Minnesota Healthcare Resource Call Center (MHRCC) at 1-833-454-0149 (toll free) or 651-201-3970 (local).
	+ Community paramedics
* Recruited volunteers, family members, community members to assist (see the Basic Care Aide curriculum).
* Considered alternative shifts. (2, 4, 8, 12-hour shifts)
* Offered appreciation pay. (Remember, this can be covered by 12A10 or Provider Relief Funds.)
* Develop support tools for staff. (Can you offer transportation, childcare assistance, grocery delivery, or other personal services that will help staff work extra shifts?)
* Reviewed resident care plans or service plans to
	+ Determine essential and non-essential cares (document orders to do so as needed)
	+ Bundle services to increase efficiency
* Reviewed office staff workplans to determine essential and non-essential work; eliminate non-essential meetings.
* Sought contracts with multiple supplemental staffing agencies.
* Called multiple supplemental staffing agencies for support.
* Executed emergency preparedness plan per memorandum of understanding documents.
* Contacted resident families for assistance.
* Called asymptomatic COVID-19 positive staff to care for COVID-19 positive residents. (Must receive prior approval to do so – [click here for detail](https://www.health.state.mn.us/diseases/coronavirus/hcp/staffoptions.html))
* Review the [COVID-19 Toolkit](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltctoolkit.pdf) from MDH.

Once these emergency staffing measures have been complete and you still have emergency staffing needs, reach out to the SEOC.

**To prepare for your SEOC call, be ready to answer the following questions:**

* What have you done for staffing options?
	+ 12-hour shifts
	+ Non-healthcare staff picking up appropriate work
* What is your schedule – with open shifts?
* Document dates you contacted others for staffing.
* Document agencies you’ve contacted.
* How many staff are out?
* Dates staff are expected to come back.
* How many shifts are open?
* How long do you think you’ll have a need to supplemental staffing?