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# Goals of service for covid-19 care facilities

[Capable of providing supplemental oxygen] :

COVID-19 Care Facilities are created to keep patients with mild or moderate severity COVID-19 patients safely out of hospitals.

## There are three main goals:

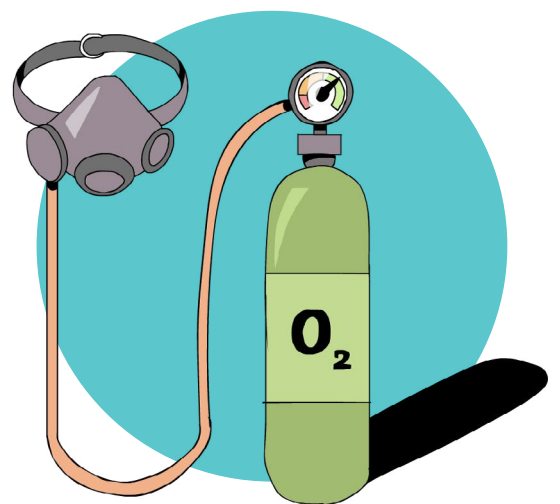
1. Supporting patients away from hospitals when it is possible to safely do so with scientifically sound treatments
2. Recognizing early patients that are getting sicker or are at a risk of getting sicker despite treatment, so they can be promptly transferred to a hospital with higher level of care
3. Monitoring patients discharged from hospitals who do not require hospitalization but would benefit from close monitoring before going home

These facilities are ONLY for patients who will require oxygen support, or are expected to immediately need it, and not for low-risk patients with mild disease who are not hypoxic.

## These facilities must be monitored by trained healthcare staff that are capable of:

- Delivering the appropriate amount of oxygen and using the correct equipment for the correct amount of time
- Administering the patient's regular home medications per schedule
- Administering oral steroid doses when indicated (see Dexamethasone Protocol)
- Proning the patient appropriately when medically warranted
- Recognizing warning signs for referring patients to higher levels of care

**Patients should not be denied treatment if they are symptomatic when local incidence of COVID-19 infections is high and testing is not available or delayed.**



# Checklist for COVID-19 care facility

[CAPABLE OF PROVIDING SUPPLEMENTAL OXYGEN]

- All clinical staff must be trained in appropriate protocols for:
  - Oxygenation
  - Proning
  - Dexamethasone
  - Monitoring and recording vitals signs and oxygen consumption
  - Maintaining medication logs
  - Recognizing warning signs for referral
  - Safe transport to higher level of care
  - Safe discharge home
- Must have adequate supply of oxygen anticipated for patient load. Monitoring daily oxygen consumption is important for estimating weekly load.
- All clinical staff should have access to higher-level decision support and on-call clinical support (even if remote) 24/7.
- There should be clear plans and communication lines for referral to higher levels of care.
- There should be clear plans for transport by appropriate means (with oxygen support) to higher levels of care.
- Clinical data, inventory and referral data must be reviewed daily to monitor individual and facility-based outcomes, as well as to detect early warning signs of a worsening surge.

