

Alaska Department of Health and Social Services
Section of Public Health Nursing
COVID-19 Offsite Collection Plan



Acronyms

SOA: State of Alaska
DHSS: Department of Health and Social Services
DPH: Division of Public Health
SOPHN: Section of Public Health Nursing
SOE: Section of Epidemiology
CDC: Centers for Disease Control & Prevention
OSCS: Offsite Collection Site
PPE: Personal Protective Equipment
DOC: Department Operations Center
PHI: Public Health Information
PIO: Public Information Officer
ICS: Incident Command Structure
PAPR: Portable Air Purifying Respirator EMS:
Emergency Medical Services
AKDOT: Alaska Department of
Transportation
SEOC: State Emergency Operations Center
EOC: Emergency Operations Center
IMT: Incident Management Team



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Introduction

In response to the COVID-19 pandemic, SOA DHSSs Division of Public Health (Section of Public Health Nursing, Section of Epidemiology, and AK State Public Health Lab) are supporting the operation of Offsite Collection Sites (OSCS) in collaboration with community partners to meet the need for increased COVID-19 testing capacity around the state.

Sites for collection will be determined by each community with consideration to ease of access, flow of traffic, and ability to provide security at the location.

Ensure access & functional needs considerations are adequately incorporated into planning. The nature of a drive-thru model may exclude a portion of the population lacking access to a vehicle. Communities should pre-plan for how to ensure these individuals can receive sample collection.

Pre-Event Planning & Considerations

In order for an OSCS to be effective and safe for staff, the public and the community, several considerations should be made regarding location and frequency of collection availability. Establishing support from response partners and coordinating logistical details is crucial for success. Acquiring specific goods and equipment prior to opening-day set-up will ensure a more successful event.

Some communities may benefit from the implementation of a collection site that operates throughout the pandemic to provide testing for mild to moderately ill people in order to relieve the burden of testing from local emergency departments and providers. Continuity of the collection site may be vital throughout this time to preserve the healthcare resources within the community.

Provide staff with appropriate Personal Protective Equipment (PPE), following CDC PPE guidelines:

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

Selection of Offsite Collection Site Location

Selection of the OSCS location with specific criteria in mind is critical for success of the event. A location must be selected with enough space for a long line of vehicles to enter, without disrupting traffic to the surrounding area. Plan for a large number of your population to attend the event.

An optimal location will have a single entrance, and all alternate entrances should be blocked. In addition, there should be an exit prior to the collection site to allow for exiting of people not requiring testing or needing access to a higher level of evaluation.



After initial Screening, an optimal location for a large OSCS will have space to allow the single line of vehicles to branch into multiple lanes. A large, open parking lot at is suitable for this model.

Coordination with External Partners

Close coordination with external partners during the planning stages is critical for success:

- Law Enforcement provides traffic control and site security. Having approval from local and state Law Enforcement agencies in advance will prevent last minute modifications in the hours before the site opens.
- Implementation of an OSCS should take place in communities that have activated their Emergency Operations Center (EOC) or Incident Management Team (IMT) so the OSCS has the support of the local emergency management system.
- Coordination with local healthcare providers for staffing and supplies will be necessary.

Optimally, the public will not be allowed to form a line or queue in the hours leading up to opening the OSCS. Minimizing the length of time the public is sitting in their vehicles is of highest importance.

Large message boards are helpful in directing the public to the entry point and provide essential information. Staging a scrolling sign (if available) at the entry point with anticipated wait times will help minimize frustration.

Resources

Resources, such as PPE, administrative supplies, collection kits, traffic cones, etc, must be requested and received prior to set-up of the event. Submit resource requests as early as possible to the logistics section of the response team in the local EOC.

Resources required to operate the OSCS:

- Tables
- Chairs
- Signage or Scrolling Message Boards
- Clip Boards
- Pens
- Labels (1x3)
- Collection Kits (UTM or VTM, dacron swabs)
- Tissues
- Biohazard Specimen Bags
- Parafilm



- Refrigerated Coolers or Lab Fridge
- Disinfectant Wipes
- Bleach
- N95 Respirators
- Face Masks
- Protective Eyewear
- Disposable Gowns
- Disposable Gloves
- Sharps Containers
- Trash Cans
- Large Waste Bags
- Scissors
- Forms

Resources recommended to operate the OSCS:

- Traffic cones
- Pop up Tents
- Heaters
- Fans
- 8.5x11 Plastic Bags (to protect paperwork if needed depending on weather)
- PAPRs

Identification of Staff

A single staff person may fill multiple roles depending on the size and configuration of the OSCS.

Screener

Screeners are the primary clinical point-of-contact for the public entering the OSCS. They are posted at the entry point for the site. Clinical experience is required- for example a nurse, pharmacist or epidemiologist.

Screeners verify individuals have a valid order from a healthcare professional for COVID-19 testing. If the individual does not have an order, the Screener will perform the epidemiological screening to verify guidelines for testing are met.

The Screener completes a Fairbanks Lab Request Form and an Alaska COVID-19 Reporting Form for each person being tested.

Specimen Collector

The Specimen Collector must be a nurse or other medical provider trained specifically in safe use of PPE and collection of the upper respiratory nasopharyngeal swab (NP).



Infection Prevention Specialist

The Infection Prevention Specialist must be a registered nurse or more advanced medical provider trained in infection prevention. This individual will provide an infection prevention briefing before opening the OSCS each day and provides training on proper donning and doffing of PPE. The specialist remains between the Screening Station and the Specimen Collection Station to assist with doffing PPE and ensure proper infection prevention techniques are being practiced.

Public Information Officer

The Public Information Officer (PIO) must be trained in public messaging and media relations. The media have rights to public spaces and will likely be surrounding the event. It is the responsibility of the PIO to ensure the media respects patient privacy - no photographs or footage of individual's faces, license plates or other identifying information.

Incident Commander

The Incident Commander (IC) can be any member of the OSCS team trained in site operations and logistical coordination. Emergency Management and Point-of Dispensing experience is helpful. Knowledge of Incident Command System (ICS) structure, resource request processes and collaboration with external partners is essential.

Logistics Support

Logistics Support can be any member of the OSCS team able to assist with set-up, demobilization, inventory counts, movement of resources, traffic control, etc.

Data Entry

Members of the Logistical Support team will be Just-in-Time trained to provide data entry support to the PHI collectors. Training will be provided by the PHI collector they are assisting.

Runners

Runners will be assigned by the logistics team to each station. Runners are responsible for Inventory and resupply of resources. Runners also empty the waste on a regular schedule.

Behavioral Health

Local Behavioral Health specialists or Alaska Respond providers must be trained in Disaster Behavioral Health and deescalation techniques.

Law Enforcement

Support from local law enforcement of the jurisdiction hosting the OSCS are responsible for



traffic control and site security.

EMS

It is recommended to have EMS staged at the OSCS with an ambulance.

Pre-Event Public Messaging

Pre-Event Public Messaging must include information about who is eligible for testing, emphasizing that people without symptoms of fever, cough, or difficulty breathing will not be tested and should not come to the event for information only. Pre-Event Public Messaging should direct people to resources for reliable information, including AK 2-1-1. Pre-Event Public Messaging should include site location, hours of operation, and explanation of how to acquire an order without going into a healthcare provider's office if that is available in the community.

Additional information helpful to keep the public informed should include procedures once at the OSCS. No bathrooms are available to the public and they are not to exit their vehicles at any point. If there will be limits to the number of vehicles allowed per event, this should be included as well.

Training of Staff

A pre-event briefing should be provided within the hours prior to opening. The IC will provide the mission for the day, outline traffic flow through the OSCS, explain the procedures at each station, and assign roles. Current testing guidelines for COVID-19 as defined in the most current Alaska Public Health Alert, will be reviewed. Defining what constitutes "a community where local transmission of COVID-19 is occurring" is helpful for interpreting the risk level of recent travel history at the Screening Station. A safety briefing, with directions on the point-of-contact for any questions, support and concern through the event, must be provided. The Infection Prevention Specialist must provide the entire group with a brief training on infection prevention, use of PPE, guidelines for those not in PPE, and detailed information regarding the risks of COVID-19.

Just-in-Time training should be provided to all members of the OSCS team prior to opening the facility. After briefing, each team member will connect with their designated lead and will receive necessary training to fulfill their role. Training on the Public Health Information (PHI) forms, donning and doffing of PPE and collection of specimens must be provided. Cross-training registered nurses to fulfill both Specimen Collection and PHI Collection is recommended.

Forms

All forms must be provided in English and a variety of languages most prominent in the area surrounding the OSCS location.



Public Health Information Forms

The Alaska COVID-19 Reporting Form must be completed for each person being tested. This form collects personal identifying information and epidemiological screening information to ensure guidelines for COVID-19 testing are met. All Alaska COVID-19 Reporting Forms must be faxed to the Section of Epidemiology by the end of the day.

The Fairbanks Lab Request Form must be completed for each specimen collected.

Patient Information Sheets

“What to Expect at Offsite Collection Sites” provides information about how the process of specimen collection will work.

“COVID-19 Testing Guidance” provides information about what you need to know in managing symptoms and reducing the risk of transmission.

Additional information should include DHSS’s [COVID-19 Facts for Alaskans](#) website and a description of the most up-to-date information found here. Additionally, information regarding when to seek additional medical care should be provided.



Operations

Entrance/Screening

The Screening Station is the first point-of-contact for members of the public visiting the OSCS. At this station, orders are verified. Screeners, dressed in full PPE, approach the vehicle and make contact with the driver. Screeners must not come into contact with the vehicle, individual or anything inside. The driver will be asked to display their order and photo ID. The Screener views both, without touching, to verify the name on the photo ID matches the name on the order. Any photo ID is accepted. Effort should be made to not exclude undocumented residents lacking government issued ID. Minors presenting for testing must be accompanied by their legal guardian.

If an order isn't presented, the Screener uses the COVID-19 Screening Algorithm to determine the client's eligibility for testing based on their symptoms and epidemiologic criteria. If the individual is symptomatic and meets CDC requirements for COVID-19 testing, the Screener completes the Alaska COVID-19 Reporting Form and places it under the windshield wiper and allows entry. An Alaska COVID-19 Reporting Form must be completed for each individual who is eligible for and receiving testing.

The Screener completes a Fairbanks Lab Request Form for each specimen being collected, and places each Lab Request Form into a separate Biohazard Specimen Bag. These bags are also secured under the windshield wiper before moving to the Specimen Collection Station. All effort must be made to minimize any contact between someone inside the vehicle and the forms in managing this process.

The Screener provides the COVID-19 Testing Guidance and What to Expect at Offsite Collection Sites. The public is informed they must remain in their vehicle at all times, and restrooms are not available at the OSCS.

Individuals using portable oxygen, and those appearing critically ill, must be connected to the emergency health care system. Establish a protocol for managing a warm hand-off between the OSCS and the Emergency Department for urgent healthcare needs. Contact the Emergency Services provider in the community to determine if they will perform COVID-19 specimen collection, or if that should be done before facilitating the transfer of care.

A designated area for doffing PPE must be established. Large waste bags are required for disposal of used PPE.



Staffing

The Screening Station will be the most time consuming station at the OSCS. Bottlenecks form here most often. The majority of your available clinical staff should be stationed here.

Equipment

- Pop-up Tent
- Gowns
- Gloves
- Respiratory Protection (N95 Respirators, PAPRs)
- Eye Protection
- Clipboards
- Disinfectant Wipes
- Trash Can
- Forms

PPE

The Screener should be in full PPE, since symptomatic people may arrive by foot or non-enclosed vehicles. Also, depending on the size and configuration of the OSCS, the same staff member may be performing both screening and specimen collection.

Forms

- COVID-19 Screening Algorithm
- Alaska COVID-19 Reporting Form
- Fairbanks Lab Request Form
- COVID-19 Testing Guidance
- What to Expect at Offsite Collection Sites

Specimen Collection

The Specimen Collection Station is the final point-of-contact for the public at the OSCS. Specimen Collectors are dressed in full PPE, including gowns, face shields, and N95 respirators or PAPRs. The Specimen Collector will come in contact with the individual being tested, and sick individuals may cough or sneeze during the specimen collection process.

The Specimen Collector will gather the forms from under the windshield. The Alaska COVID-19 Reporting Form is placed in a marked bin. A label is made by the Specimen Collector based on the information provided on the Fairbanks Lab Request Form to include two unique patient identifiers. A test kit is opened, the packaging discarded in a trash bin, and the label is applied to the tube containing the viral media.

The Collector explains the upper respiratory nasopharyngeal swab (NP) procedure and what to



expect. The collection is completed and the swab is carefully broken or snipped to proper size. The top of the test tube is secured, parafilm, and placed back in the biohazard specimen bag. The biohazard specimen bag, containing the completed specimen, is placed in a cooler designated for specimens with the Fairbanks Lab Request Form included in the biohazard specimen bag pocket.

Need guidance here for what PPE must be changed between clients to preserve safety of staff and clients and preserve PPE.

A designated area for doffing PPE must be established. Large waste bags are required for disposal of used PPE.

Specimens must be stored at 2-8 degrees Celsius. Include a cold pack in the coolers if necessary.

Staffing

Specimen Collection will likely go more quickly than Screening and paperwork completion.

Equipment

- Pop-Up Tent
- Gowns
- Gloves
- Respiratory Protection (N95 Respirators, PAPRs)
- Eye Protection
- Biohazard specimen Bags
- Sample Kits
- Labels (1x3)
- Sharpies
- Coolers
- Ice packs
- Trash Cans
- Large waste bags
- Disinfect Wipes
- Scissors

PPE

The Specimen Collection Station is a Hot Zone.

Forms

No forms are required for this station.



Shipping specimens

All specimens will need to be shipped to the lab providing testing. Shipping of specimens must follow the [CDC shipping guidelines](#) for COVID-19 specimens, as well as [IATA shipping regulations](#).

Demobilization

Demobilization must carefully consider biohazard risks at all stations. Large waste bags are needed to gather used PPE.

All Alaska COVID-19 Reporting Forms must be faxed to Epidemiology at (907) 563-7868.

Law Enforcement will remain in place until the site is completely demobilized.

Other Considerations

Public Restrooms

To minimize exposure to staff at the OSCS, this model assumes the public will not exit their vehicles at any time. Restroom use is not possible with this model.

Minimizing wait times for the public in their vehicles is essential to eliminate the need for restrooms. Wait times of less than 75 minutes seemed to be manageable for visitors at the OSCS without restroom breaks. Upwards of 90 minutes becomes problematic.

Additionally, when constrained to a vehicle for multiple hours, it is more likely members of the public will stop at the nearest business to use the restroom once they left the OSCS. We must protect the neighborhoods we're operating in to ensure sick individuals are not visiting nearby businesses out of desperation.

Post Specimen Collection Follow Up

The results from COVID-19 tests at the OSCS must be delivered to each individual, regardless if the result was negative or positive. Phone numbers are collected on the PHI Forms. DHSS will utilize support staff to deliver negative results via phone. SOPHN will be utilized for delivery of positive results, and provide the next-steps for those requiring isolation.

Media



It is likely multiple media outlets will be at the OSCS. It is crucial to have a skilled PIO on site to organize a Media Staging Area and enforce parameters for photos and video. Due to the medical nature of the OSCS, ensuring patient privacy is essential. Media cannot be allowed to photograph or film faces or license plates of the individuals visiting the OSCS. Any personal identifying information must be avoided. Finding a Media Staging Area that provides a clear line of sight to OSCS staff donning and doffing PPE, speaking with the public and conducting specimen collection, without exposing faces of the individuals is helpful.

Breaks for Staff

PPE, specifically the respiratory protection, can become overwhelming to clinical staff. Working outdoors, under the sun or in the heat and wind can amplify the discomfort. It is crucial to ensure adequate staffing of the OSCS so each clinical worker remains in PPE no longer than 75 minutes without a break. Doubling the number of required clinical staff for each station will ensure every worker can have adequate breaks. Switching shift every 75 minutes will allow a OSCS to operate for at least 4 hours.

Leaving staff in PPE longer than 75 minutes, without a break, can trigger extreme anxiety. Workers may rip their respiratory protection off without following proper doffing procedures, increasing their risk of exposure. It is impossible to hydrate or use the restroom wearing PPE, so providing a second shift to relieve staff regularly will protect your workers.

Assessments of Public in their Vehicles

To ensure visitors to the OSCS are not critically ill in their vehicles, left unattended by OSCS staff, preventing the formation of a line prior to opening is encouraged. Having sick individuals isolated in their vehicles, sometimes for hours if the queue becomes long enough, is dangerous to the public. By allowing vehicles to line up only when staff is ready to begin initial triage will ensure primary contact and assessment is made early. Critically ill individuals, those with portable oxygen, or those at risk of becoming critically ill during the wait, must be triaged to the front of the line for expedited collection.

The wait time for Screening can become lengthy, depending on traffic flow at the OSCS. Ensuring behavioral health staff, wearing adequate PPE, are roaming through the line of vehicles can help identify medical emergencies. A runner, or other member of the Logistics Support Staff, can also be assigned this role.

PPE Use

It is crucial to have clinical staff experienced wearing PPE. A Just-in-Time training will be provided to all staff during briefing, and any role specific guidelines will be covered by the



Infection Prevention Specialist. Having inexperienced clinical staff wearing restrictive PPE for long time periods increases their risk of exposure.

Walk-Up Visitors

It is likely the OSCS will encounter visitors who lack access to a vehicle. Walk-up visitors and those arriving using public transportation, on a bicycle or other non-enclosed vehicle must be handled in a manner that assures protection of staff and minimizes disease transmission. Full PPE must be worn by everyone communicating with those individuals. Walk-up visitors who appear to be critically ill or using portable oxygen must be expedited to emergency medical care, as they would in a vehicle.

Rural Considerations

Small communities may benefit from a more limited model that emphasizes prevention of transmission and implementation of screening procedures to allow for expedited collection of eligible people. Procedures could be put into place to allow symptomatic constituents to contact the local clinic for triage and completion of PHI forms over the phone, then present to clinic for collection from the parking lot. This would limit exposure risk to staff and other patients at the healthcare facility. All strategies should be handled in a manner that assures protection of staff and minimizes disease transmission.