

Appendix 1. Questionnaire

EVALUATION OF ARCHITECTURAL EMERGENCY STRUCTURES IN THE CONTEXT OF THE 2019-nCOV PANDEMIC

Hospital Centre Name

E-mail

General information on emergency structures

Q.1 Type of emergency department: Adult Adult and Paediatric

Q.2 Number of beds available in the traumatology emergency department:

Q.3 Number of beds available in the medical emergency department:

Q.4 ED visits in 2019

Q.5 ED visits in February

Q.6 ED visits in March

Q.7 ED visits in April

Q.8 ED visits in May

Q.9 COVID Daily Emergency Visits in February

Q.10 COVID Daily Emergency Visits in March.....

Q.11 COVID Daily Emergency Visits in April.....

Q.12 COVID Daily Emergency Visits in May

COVID Zone Creation-White PlanQ.13 Creation of a Covid Zone Yes No

Q.14 Date of the creation of the COVID zone: .../.../2020

Q.15 Date of start of white plan: .../.../2020

Q.16 Triggers for emergency restructuring:

 Number of cases in France Number of cases in the region Number of local cases Other:

Q.17 Mandatory mask-wearing

- Suspected COVID patients only Yes No- Any patient presenting at the ED Yes No

Q.18 If mask wearing is mandatory, on what date did this start? .../... /2020

Q.19 At the highest level of pressure, estimate the percentage (%) of area used for suspected COVID patients:

Q.20 At the highest level of pressure, estimate the percentage (%) of area used for non-suspected COVID patients:

Q.21 Has there been an increase in the emergency area, if yes by what means?

 Installation of an outdoor tent type NRBC Extension in the emergency building already anticipated Use of a space not initially dedicated to emergencies Other

Q.22 If Yes, estimated percentage increase in area

Q.23 In the event of emergency capacity being exceeded, has another COVID19 circuit been planned? Yes No

Q.24 If yes:

 It is located within the ED It is located outside the ED This circuit had to be activated during the pandemic

Q. 25 Have one or more channels been created by one or more other specialties for patients not suspected of COVID19? Yes No

Q. 26 If yes, specify the sector concerned (trauma, urology, etc.) and who supervises the sector (emergency physician, surgeon, etc.):

Q. 27 Were one or more medical centres created or affiliated for COVID19 General Medicine consultations during the day? Yes No

Q. 28 How many major restructuring changes were made to your department and which were the major ones for you?

Q. 29 Do you make an administrative record on SIVIC in emergencies? Yes No

Q. 30 Has the end of the COVID/Non-COVID distinction been defined? Yes No

Q. 31 If yes, what date - - / - - / - - - -

Reception/Flow/Circulations

Q. 32 Concerning access of families to the different areas, have you decided on:

No family visit, telephone contact only; no family visit, telephone or videoconference contact possible

Visit possible: only one companion if severity criterion is met

Decision on a case-by-case basis

Other:

Q. 33 Are there two separate triage areas for suspected COVID19 and non-suspected patients? Yes

No

Q. 34 Location of the triage area for COVID19 patients?

Pre-existing reception separated into two

Outdoor tent adjacent to emergencies

Other structure already in place but with another function (administrative offices, waiting room...)

Other.....

Q. 35 Does the Patient Triage Area have a coordinating and regulating doctor (MAO) for emergencies?

There is no coordinating and regulating doctor for emergencies

Already in place prior to the pandemic

Put in place after the pandemic began

Dedicated to suspected COVID Patients

Q. 36 Are patients with low resource consumption (lack of additional examination, lack of hospitalization criteria) redirected by the IOA or the MAO to an outpatient unit? Yes No

Q. 37 Are patients directed to different areas based on severity, even for non-COVID19 patients (e.g., Fast track, valid, recumbent, emergency room)?

Yes

No

Only for non COVID19 patients

Only for COVID19 patients

Q. 38 In the ED waiting room, COVID and non COVID patients are:

In two different locations

Separated by a physical barrier (wall, tarpaulin...)

Separated virtually or by a non-airtight barrier

Not separated

Q.39 What means are used to separate the COVID zone?

Walls already in place sufficient for delimitation

Addition of hermetic barriers to isolate the area

Other

- Q.40 Presence of an emergency room for life-threatening conditions: Yes No
- Q.41 Is there an emergency room for life-threatening conditions dedicated solely to suspected COVID patients?
Yes No
- Q. 42 If yes, number of ER beds for patients suspected of COVID?
- Q.43 Is there a dedicated X-ray location for suspected COVID19 patients? Yes No
- Q.44 Is there a location reserved for scanning suspected COVID19 patients? Yes No
- Q. 45 Is there signage to limit circulation in the area of high viral density, present from reception?
Yes No
- Q. 46 Is the route between the emergency department and the critical care services safe? (No cross-flow in particular) Yes No
- Q. 47 Is the circulation of suspected COVID19 patients completely separated from the entry to exit of non-COVID patients? Yes No
- Q. 48 Is the circulation in the service separated from any other flow that is unrelated to their activity (personnel external to the service, intra-hospital patient transfers, logistics and supply flow, etc.)?
Yes No
- Q. 49 Are the corridors wide enough in each area to allow two stretchers to pass each other (> 2m)?
Yes No
- Q. 50 Is there a monitoring area?
- In the COVID sector
 - In the non-COVID sector
 - It is the same monitoring area separated virtually
 - It is the same monitoring area separated physically
 - Patients are separated by curtains or walls
- Q.51 Is there a buffer zone before transfer to a service or exit?
- Yes
 - No
 - Patients are transferred directly to the services or exit
 - The buffer zone is in the corridors
- Q. 52 Is there a short stay hospitalisation unit still active? Yes No
- Q. 53 If Yes:
- Only for COVID
 - Only for non COVID
 - For both, it has been separated
 - These are single rooms
 - There are several patients per room
 - Other.....

Human Resources Management:

- Q. 54 Did you recruit additional medical staff? Yes No
- Q. 55 If so, how many more people per 24 hours?
- Q. 56 Was the organization the same during the day and night? Yes No
- Q. 57 Did you involve external doctors in your emergency department? Yes No
- Q. 58 If yes, from what specialty/ies:
- Q. 59 Did you involve firefighters in your emergency department? Yes No
- Q. 60 Did you involve volunteer first aiders in your emergency department? Yes No
- Q. 61 Do medical personnel work exclusively in COVID or non-COVID? Yes No

Q. 62 Do paramedics work exclusively in COVID or non-COVID? Yes No

Q. 63 Can Caregivers switch between sectors depending on the flow? Yes No