Ideally, the alternative care space is staffed with a Registered Nurse and Patient Care Technician consistent for the number of patients receiving mAb administration. Access to ACLS services and appropriate resuscitation equipment must remain imminently available throughout mAb administration and subsequent monitoring. In addition, it is ideal for an advanced practice provider to be imminently available in the event of medication reaction or other associated complication.

*\*\*RN/LPN/PCT practices are based on State Board of Nursing/Board of Health guidance\*\**

| **Staffing** | **Role** | **Tasks** |
| --- | --- | --- |
| Provider with Appropriate Privileging | Referral Provider | * Clinical assessment of eligibility criteria
* Order bamlanivimab
 |
| Provider – APRN, PA, etc.  | Oversight | * May be needed to oversee larger infusion units or stand-alone infusion areas
 |
| * Scheduler/Registration
* Remote/Central Scheduling
 | Schedule Patient for Treatment | * Schedule appointment (each patient appointment takes-180mins), includes assessment of availability of:
* Provider order for care
* Infusion space
* Staffing
* Medication supply and ability to prepare and dispense
* Schedule should allow for at least 15 minutes of setup prior to patient arrival, and at least 15 minutes of transition time after last patients leaves
* Instructions to patient on arrival procedures to infusion space
* Communicate back to repurposed inpatient unit staff about upcoming appointment schedule

\*Central Scheduling can staff scheduling of patients. Scheduling staff may need to be assessed as program volume increases.\* |
| * Pharmacist
* Pharmacy Technician
 | Medication Procurement & Preparation/Dispensing | * Preparation of the bamlanivimab
* Dispensing of the bamlanivimab

\*Will be required to mix and deliver medications upon each patient arrival. Additional technician resources may be needed to deliver medications – if volume > 8 patients during off hours, plan for Tech to cover during infusion time (i.e. first 2 hours of 4 hour schedule).\* |
| Registered Nurse (RN) | * Patient Intake
* Medication Administration
* Post-Medication Administration
* Patient Release
 | Patient Intake:* Validate VS
* Perform medication verification
* Ensure consent to treat is obtained

**Medication Administration:*** IV Initiation – stagger start times of concurrent infusions, not to exceed a ratio of 1 RN to 4 patients
* Monitor Infusion Administration (60 mins)

**Post Medication Administration:*** Post-infusion observation (60 mins)

**Patient Release:*** Discharge education and documentation
 |
| **Patient Care Tech (PCT)** | * **Patient Intake**
* **Post-Medication Administration**
* **Patient Release**
 | **Patient Intake:*** Pretreatment assessment and clinical documentation:
* Vital signs
* Height/weight

**Post-Medication Administration:*** Post-infusion observation (60 mins)
 |
| **Licensed Practical Nurse (LPN)** | * Patient Intake
* Post-Medication Administration
* Patient Release
 | **Patient Intake:*** Pretreatment assessment and clinical documentation:
* Vital signs
* Height/weight

**Post-Medication Administration:**Post-infusion observation (60 mins)\*Can be exchanged with RNs if LPNs are not available\* |
| **Emergency Response Team** | * Medication Administration
* Post-Medication Administration
 | * Adverse event precaution (i.e. infusion reaction policy)
* Emergency response team for code response if needed
 |
| **Alternate Staff to Place IV** | * Access Issues
 | * Support in the event RN unable to gain patient IV access
 |
| **Environmental Services (EVS)** | Cleaning | * COVID-19 cleaning/disinfection
* Utilize non-porous surfaces: no fabric, if cubicle curtains are present please use disposables

\*Will be required to assist with patient turnovers and terminal cleaning (20 minutes per patient if patient not located in private room that has bathroom). If exceeding 10% of designated area man hours during specified hours of operation, will need to plan for incremental EVS staff adds. \*See example in staffing grid below |
| **Security** | Security | * Medication security – locked safe
 |
| **RN/PCT/LPN** | Post-Discharge follow-up | * Post discharge follow-up protocol
 |