

FAQ: Alternate Care Sites

- **How are tents being staffed?**

Staffing is the responsibility of the hospital that has oversight of the tent/alternate care site. Currently, hospitals are using the usual scheduling methods for staffing. Hospitals can hire directly, go through MHA's Chesapeake Registry, or go through a staffing agency of your choice. Within the next week, the Registry will be connected to a unique system of staffing agencies with enhanced capabilities to source potential care providers.

- **How does the power supply to the tent work, ? Is it run off a generator? Who is responsible for refueling?**

If the company setting it up does not have access to the hospital's or other facility's electrical system, a rental generator is provided for back up. The hospital or facility is responsible for refueling and the logistics surrounding it. The generator rental and generator service go through a contract with the Maryland Department of Health.

- **How big are the tents?**

The tent measures 19.6 feet by 59 feet.

- **What is the process for all types of waste disposal?**

A hook up to public utilities is preferred. If that's not possible, a grey water tank and routine clean out will be added in the contract. Trash and biohazard waste should follow normal facility procedures.

- **How are medical supplies acquired?**

The State can assist with ordering and acquisition of equipment. What is ordered depends on the prescribed use of the tent. For additional please reach out to Ken Bellian at MDH—contact information below.

- **Will the state come to the site to assess a location for the tent before set-up?**

The State does not make a site visit for all tents/modular/alternative care sites. This is completed by Maryland Department of General Services staff and/or the Army Corps of Engineers.

- **Do the tents have ICU capability?**

The tents have a headwall to provide medical/surgical care. It is possible to increase the level of acuity of care as the hospital determines necessary.

- **Can you connect the tent to another should an additional ten-patient tent be needed?**

The tents can be put side by side and/or connect lengthwise. It depends on the site and what the construction team feels is possible.

- **Does the state have a plan for transport to morgue sites for deceased persons, and will the state provide alternate morgue sites as well?**

Yes, the State has a plan for both.

- **Is the tent equipped with lighting?**

Yes, the tent has lighting.

- **Does the tent come with patient beds?**

The State can assist with obtaining supplies and equipment. They ask that hospitals contribute as much as possible. A few hospitals have extra equipment such as pumps, sequential compression devices (SCDs), beds, and soft supplies.

- **Can we request all the equipment for a ten-person tent, but not the tent itself?**

There are hospitals that are opening additional beds inside their current facilities and lack a complete complement of supplies and equipment. They may speak with the supply chain, or their normal request process.

- **How will the tent be delivered and how will a facility know when it will be delivered? Who is responsible for setting up and taking down the tent?**

[Tom LeQuire](#), of DGS, will contact the person who hospitals identified in an earlier survey. Tom is the lead contact for this project, and responsible for delivery, and set-up and take down.

Would the tents be purchased by MDH for hospitals to “own” and manage after completion of emergency?

The tents are rented, and are not owned during use, and will not be available to be kept after the pandemic is mitigated.

POINT OF CONTACT AND ANY QUESTIONS FOR THE TENT SURGE PROJECT
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