

## Crisis Standards of Care: State of Arizona Clinical Workgroup

Arizona Dept of Health Services & Partners  
Phoenix, AZ  
October 11, 2013

Facilitator  
Frank G. Walter, MD, FACEP, FACMT, FAAC



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## Crisis Standards of Care: State of Arizona Clinical Workgroup

- Agenda for October 11, 2013
  - 1230-1245
    - Introductions
  - 1245-1300
    - IOM crisis standards of care (CSC)
  - 1300-1400
    - Discuss possibilities for expanded scopes of practice for healthcare professionals during CSC
  - 1400-1500
    - Discuss possible methods for reporting status of limited space, staff, & supplies (3Ss) at a healthcare facility during CSC
  - 1500-1530
    - Wrap up



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## Crisis Standards of Care: State of Arizona Clinical Workgroup

- Review work of 7/17/13 meeting
- Objectives for 10-11-13
  - Recommend **expanded scopes of practice** for healthcare professionals during CSC
  - Recommend methods for reporting **status of limited space, staff, & supplies (3Ss)** at a healthcare facility during CSC



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### Arizona CSC: Approved by SDMAC Planning Committee, 6/27/13

<b>Desired Future State</b>	Develop & implement a compassionate, ethically-based healthcare response for catastrophic disasters, using crisis standards of care (CSC) co-developed by key stakeholders.
<b>Vision</b>	Arizona will become a national model in CSC planning and implementation by February 2014.
<b>Mission</b>	Provide framework & standards for response to & recovery from catastrophic disasters, enabling optimal community resilience for the healthcare system, statewide.
<b>Values</b>	<p><b>Transparency:</b> Provide open, honest, factual, &amp; timely communication &amp; information sharing.</p> <p><b>Consistency:</b> Implement processes &amp; procedures across the continuum of care; applying the same methodologies to achieve optimal community health.</p> <p><b>Fairness:</b> Support respect &amp; dignity for all populations when providing healthcare across the continuum of care.</p> <p><b>Accountability:</b> Take responsibility for actions, complete assigned work, &amp; follow through on requests &amp; communications.</p> <p><b>Resiliency:</b> Provide for the recovery of emotional, spiritual, intellectual, and mental health needs and facilitate the well-being of the community.</p> <p><b>Evidence-based:</b> Formulate decisions on medically founded, state-of-the-art, &amp; research tested (when available) facts &amp; processes to promote optimal community health.</p>



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## Crisis Standards of Care: State of Arizona Clinical Workgroup

- Accomplishments on July 17, 2013
  - Recommended activation criteria for crisis standards of care (CSC)
  - Recommended primary, secondary, & tertiary triage methods for limited healthcare resources
    - Using evidence-based guidelines when possible



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## Presentation Outline for 10-11-13

- IOM crisis standards of care (CSC)
- Expanded scopes of practice for healthcare professionals during CSC
- Methods for reporting status of limited space, staff, & supplies (3Ss) at a healthcare facility during CSC



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### IOM Crisis Standards of Care

- Seek community & provider **engagement** preparing for & during CSC
- Adhere to **ethical norms** during CSC
- Provide necessary **legal protections** for healthcare providers & institutions using CSC
- Ensure intrastate & interstate **consistency** during CSC
  - Clear indicators, triggers, & lines of responsibility
  - Evidence-based clinical processes & operations


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### IOM Crisis Standards of Care

- Substantial change in usual healthcare operations & level of care
- Justified by specific circumstances
- Formally declared by state government
  - Scope
    - ≥ Statewide
  - May authorize
    - Alternate care sites
    - Alternate staffing levels
    - Expanded scopes of practice
- Long-term crisis




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### Allocation of Specific Resources along the Care Capacity Continuum

Incident demand/resource imbalance increases →  
 Risk of morbidity/mortality to patients increases →



CSC Triggers	Conventional	Contingency	Crisis
Space	Space fully used	Patient care areas repurposed	Non-patient care areas used for patient care Facility may be damaged or unsafe
Staff	Usual staff called in & working	Expanded staff responsibilities Elective procedures & admissions deferred	Trained staff unavailable or unable to care for volume of patients
Stuff	Cached & usual supplies used	Conservation, adaptation, & substitution with safe re-use of select items	Critical items lacking Possible re-allocation of life-sustaining resources
Standard of Care	Unchanged	Functionally equivalent care	Best possible care in difficult circumstances with limited resources: Requires state empowerment for SOMAC activation, Clinical guidance & protection for triage decisions, & Authorization for alternate care sites

Source: IOM, Crisis Standards of Care, 1-41


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### IOM CSC: 3 Cs

- **Conventional care**
  - Space, staff, & supplies (stuff) [3Ss] in daily practice
- **Contingency care**
  - 3Ss not used in daily practice
    - Functionally equivalent patient care
  - Patient care areas repurposed
  - Elective procedures & admissions deferred
  - Expanded staff responsibilities
  - Conserve, adapt, & substitute supplies
  - Safely re-use select supplies
- **Crisis care**
  - Adaptive 3Ss not used in daily practice
  - Best possible care in difficult circumstances with limited resources


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### Scope of Practice

- **Definition**
  - Extent of licensed healthcare professional’s ability to provide services consistent with their
    - Competence
    - License
    - Certification
    - Privileges

Source: IOM, Crisis Standards of Care, 1-41 & 7-4


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## Scopes of Practice

- EMTs
- Nurses
  - NA, LPN, RN
  - APN, CNS, NP
  - RNFA, Nurse Anesthetist
- Pharmacists
- Physicians
- Physician's Assistants
- Psychologists


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## Scopes of Practice

- Healthcare providers should practice in interprofessional teams, practicing to the top of their licenses.
  - Thomas R. Frieden, MD, MPH
  - Head of the U.S. Centers for Disease Control and Prevention (CDC)


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## Scopes of Practice

- Possibilities
  - Limited licensure reciprocity
    - Recognize out-of-state healthcare licenses for the duration of a healthcare crisis
  - EMS expanded scopes of practice
    - Altered staffing ratios
    - Alternate destination policies or vehicles
    - Treat & release
    - Hospital evacuation
    - Vaccine administration
    - New tasks with just-in-time training
      - In addition to prior preparedness training
    - New practice settings or durations
      - Clinics
      - Hospitals, etc.


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## Scopes of Practice

- Possibilities
  - Non-EMS expanded scopes of practice
    - Relaxed documentation requirements
    - New, external staff
    - New tasks with just-in-time training, in addition to prior preparedness training
      - Minimum risks
      - Maximum population benefits
    - New practice settings or durations
      - Clinics
      - Units, etc.


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## Colorado Legislation: Emergency Medical & Trauma Services Act

- Allows physicians assistants (PAs) & EMTs to practice under the supervision of any licensed Colorado physician
- Allows for out-of-state physicians & nurses with licenses in good standing & Colorado physicians & nurses with inactive, unrestricted Colorado licenses to
  - Practice under the supervision of a licensed Colorado physician or nurse


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## Arizona Board of Nursing

- Governs all nursing practice
- Nursing practice legislated & reflected in rules & regulations
- Advisory opinions issued for extended practice


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## Advisory Opinion

- Adopted by the Arizona Board of Nursing, interpreting what the law requires.
  - While not law, it is more than a recommendation.
  - Official opinion of Arizona Board of Nursing regarding practice of nursing relating to a specific standard of care.
  - ARS 32-1606 (A) (2)



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## Advisory Opinions Issued

- Analgesia by catheter techniques
  - Intrathecal
  - Perineural
  - Interpleural
- Epidural anesthesia
- Bone aspiration & biopsy
- Central line insertion
- Removing mediastinal & pleural chest tubes



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## Limited Space, Staff, & Stuff (3Ss) for CSC

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• <b>Space</b> <ul style="list-style-type: none"> <li>– Hospitals</li> <li>– Intensive care units (ICUs)</li> </ul> </li> <li>• <b>Staff</b> <ul style="list-style-type: none"> <li>– Healthcare professionals</li> </ul> </li> <li>• <b>Suggestions?</b></li> <li>• <b>Source</b> <ul style="list-style-type: none"> <li>– IOM, Crisis Standards of Care, 7-15</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• <b>Stuff</b> <ul style="list-style-type: none"> <li>– Medical transportation</li> <li>– Medications</li> <li>– Airway &amp; breathing               <ul style="list-style-type: none"> <li>• Oxygen &amp; oxygen delivery systems</li> <li>• Ventilators</li> <li>• Extracorporeal membrane oxygenation (ECMO)</li> </ul> </li> <li>– Cardiovascular               <ul style="list-style-type: none"> <li>• Vascular access devices</li> <li>• IV fluids</li> <li>• Blood products</li> </ul> </li> <li>– Elimination               <ul style="list-style-type: none"> <li>• Renal replacement therapy</li> </ul> </li> <li>– Wound/burn care supplies</li> <li>– Surgical equipment</li> </ul> </li> </ul> |
|---|--|



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## Methods for Reporting Status of Limited Space, Staff, & Stuff (3Ss) at Healthcare Facilities

- Notify County
  - Health Department
  - Emergency Management
- EMResource
  - Proprietary tool used by ADHS
  - HAVBED (Have Available Bed in Emergencies & Disasters)
    - Federal bed poles & situational assessments, e.g., H1N1
- ADHS Division of Licensing Services
  - Waiver requests
- Arizona Burn Disaster Network Telemedicine Program
- Poison Control Centers
  - 1-800-222-1222
- Suggestions?



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## Special Resources for Space, Staff, & Stuff (3Ss) for CSC

- EMS
- Trauma Centers
- Arizona Burn Center
- Pediatric Hospitals
- Arizona Infectious Disease Referral Centers
- Radiation Injury Treatment Network
- Poison control centers
- Clinics & mental health agencies
- Dialysis facilities
- Long-term care facilities
- Home healthcare agencies
- Hospice
- Public health departments
- Suggestions?



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### Acknowledgements

- Antonio Hernandez
- Megan Jehn, PhD, MHS
  - Coauthor & co-presenter
    - Considerations For Prioritizing Medical Care During an Overwhelming Influenza Pandemic
- Peter Kelly, MD
- Andrew Lawless, MBA, PMP
- Wendy H. Lyons, RN, BSN, MSL
- Ruth E. Penn, MBA
- Deborah Roepke, MPA


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### Acknowledgements

- Thank you!
  - To all members of the State of Arizona Clinical Workgroup for Crisis Standards of Care, for your
    - Time
    - Dedication
    - Service
    - Expertise
- Resource Materials
  - ADHS BPHEP Crisis Standards of Care (CSC) Project
    - <http://1.usa.gov/148dOtS>

URL is case sensitive


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### Questions & Suggestions




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