Arizona Department of Health Services

Andrew Lawless, Training Officer
Public Health Emergency Preparedness

Arizona Crisis Standards of Care (CSC) Initial Planning Workshop for Statewide CSC Planning

Agenda
8:30 Registration
9:00 Introduction – Teresa Ehnert
9:15 IOM Crisis Standards of Care Overview, Andrew Lawless
9:30 Crisis Standards of Care, Clinical Issues, Frank Walter, MD
10:15 BREAK
10:30 Legal Issues in Public Health Emergencies, James Hodge, JD
11:00 Applying AZ Law to PH Emergencies, Aubrey Joy Corcoran, JD, MPH
11:30 Ethical Issues in Public Health Emergencies, Daniel Orenstein, JD
12:00 LUNCH
12:45 Breakout session I
1:45 Breakout session II
2:45 Breakout session III
3:45 Report Back Session
4:15 Next Steps and Final Comments – Teresa Ehnert & Andrew Lawless
4:30 ADJOURN

ACRONYMS

ACS Alternate Care Systems
CSC Crisis Standards of Care
EM Emergency Management
EMS Emergency Medical Services
IOM Institute of Medicine
PH Public Health
RDMAC Regional Disaster Medical Advisory Committee
SDMAC Statewide Disaster Medical Advisory Committee
SOFA Sequential Organ Failure Assessment

BREAKOUT SESSIONS

- Each participant is assigned to one of three groups (RED, GREEN, or BLUE)
- Each group will attend each breakout session on a separate track
- Breakout session facilitators will guide discussions
- Group feedback will be documented on flip charts
- Participant feedback forms should be filled out at the end of each breakout session (total of 3)
- Participants will have opportunity to provide a brief summary of group discussions at the end of the day

Teresa Ehnert
Bureau Chief, Public Health Emergency Preparedness
Arizona Department of Health Services
Statewide Disaster Medical Advisory Committee Response Structure

Antonio Hernandez
Section Chief Partner Integration
Andrew Lawless, Training Officer
Arizona Department of Health Services
Core Functions for Hospital Facilities

Megan Jehn, PhD, MPH
Director, Global Health Program
Arizona State University
Public Engagement Process

Crisis Standards of Care
A Systems Framework for Catastrophic Disaster Response

VOLUME 1: Introduction and CSC Framework
VOLUME 2: State and Local Government
VOLUME 3: EMS
VOLUME 4: Hospital
VOLUME 5: Alternate Care Site Facilities
VOLUME 6: Public Engagement
Crisis Standards of Care
VOLUME 1 – Chapters 1 - 4
1. Introduction
2. Catastrophic Disaster Response: Creating a Framework for Medical Care Delivery
3. Legal Issues in Emergencies
4. Cross-Cutting Themes: Ethics, Palliative Care, and Mental Health
   • Key for all staff involved in CSC Planning
   • Explains CSC history and systems approach

Crisis Standards of Care
VOLUME 2 – Chapter 5
5. State and Local Governments
   Roles and Responsibilities of State Government
   Roles and Responsibilities of Local Government
   Operational Considerations
   Template Descriptions
   Core Functions for CSC Plan Development (Within States)
   Core Functions for Implementing CSC during incidents
   References

Crisis Standards of Care
VOLUME 3 – Chapter 6
6. Prehospital Care: Emergency Medical Services (EMS)
   Roles and Responsibilities of Emergency Medical Services
   Operational Considerations
   Template Descriptions
   Core Functions of EMS in CSC Plan Development
   Core Functions for EMS CSC During Implementation
   References

Crisis Standards of Care
VOLUME 4 – Chapter 7
7. Hospitals and Acute Care Facilities
   Roles and Responsibilities of Healthcare Facilities
   Operational Considerations
   Template Descriptions
   Core Functions of Hospitals and Providers in Implementation
   References

Crisis Standards of Care
VOLUME 5 – Chapter 8
8. Out of Hospital and Alternate Care Systems
   Roles and Responsibilities of Out-of-Hospital and ACS
   Operational Considerations
   Template Descriptions
   Core Functions During in Planning and Implementation
   References

Crisis Standards of Care
VOLUME 6 – Chapter 9
9. Public Engagement
   Goals and Benefits
   A Model for Public Engagement: Resources for State/Local
   Essential Principles of Public Engagement
   Challenges and Strategies
   Toolkit Description
   Conclusion, References, Guidebooks, etc.
Crisis Standards of Care

VOLUME 7 – Appendixes

A Glossary
B Hospital Emergency Operations Plan CSC Annex
C Potentially Scarce Medical Resources by Category
D Resource Challenges by Disaster Type
E Statement of Task
F Committee Biographies

What are Crisis Standards of Care?

Five Key Elements for all CSC Plans

• A strong ethical grounding... based transparency, consistency, proportionality, and accountability
• Integrated and ongoing community and provider engagement, education, and communication
• The necessary legal authority and legal environment in which CSC can be ethically and optimally implemented
• Clear indicators, triggers, and lines of responsibility
• Evidence-based clinical processes and operations

Crisis Standards of Care Defined

The level of care possible during a crisis or disaster due to limitations in supplies, staff, environment, or other factors. These standards will usually incorporate the following principles: 1) prioritize population health rather than individual outcomes; 2) respect ethical principles of beneficence, stewardship, equity, and trust; 3) modify regulatory requirements to provide liability protection for healthcare providers making resource allocation decisions; 4) designate a crisis triage officer and include provisions for palliative care in triage models for scarce resource allocation...

What is a systems approach?

Crisis Standards of Care cont.

...Crisis standards of care will usually follow a formal declaration or recognition by state government during a pervasive (pandemic influenza) or catastrophic (earthquake, hurricane) disaster which recognizes that contingency surge response strategies (resource sparing strategies) have been exhausted, and crisis medical care must be provided for a sustained period of time. Formal recognition of these austere operating conditions enables specific legal/regulatory powers and protections for healthcare provider allocation of scarce medical resources and for alternate care facility operations...

(IOM, Crisis Standards of Care, 7-1 and 7-2)
System Defined

A system is composed of regularly interacting or interrelated components that can function independently

(Merriam Webster Dictionary, 2012)

Systems Defined Approach for crisis, disaster, and risk mgmt.

A management strategy that recognizes that disparate components must be viewed as interrelated components of a single system, and so employs specific methods to achieve and maintain the overarching system. These methods include the use of standardized structure and processes and foundational knowledge and concepts in the conduct of all related activities.

(George Washington University, 2009)

Catastrophic Disaster Defined

1) Most or all of the community’s infrastructure is impacted.
2) Local officials are unable to perform their usual roles for a period of time extending well beyond the initial aftermath of the incident
3) Most or all routine community functions are immediately and simultaneously disrupted
4) Surrounding communities are similarly affected, and thus there are no regional resources

(IOM, Introduction and CSC Framework 1-15)

CSC Assumptions for catastrophic disaster response conditions:

- Resources are unavailable or undeliverable to HC facilities
- Similar strategies being invoked by other healthcare delivery systems
- Patient transfer not possible
- Access to medical countermeasures (vaccine, meds, antidotes, blood) likely to be limited
- Available local, regional, state, federal resource caches (equip, supplies, meds) have been distributed - no short term resupply

(IOM, Crisis Standards of Care, 1-10)

Continuum of Care

<table>
<thead>
<tr>
<th>Surge Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Conventional</td>
<td>Business as usual. May include seasonal increases in service (winter visitors, flu season, etc.).</td>
</tr>
<tr>
<td>2) Contingency</td>
<td>Conventional care continues until demand for care outpaces available resources. Capacity to surge is maximized and eventually leads to crisis.</td>
</tr>
<tr>
<td>3) Crisis</td>
<td>Overwhelming demand for services marked by shortages of equipment, supplies, pharmaceuticals; personnel. Requires substantial operational adjustments</td>
</tr>
</tbody>
</table>
How does CSC fit with the bigger picture of public health and healthcare preparedness?

Preparing for Disaster

Crisis Standards of Care ("CSC")—a piece of the puzzle

Stakeholders – The Public Health Preparedness Landscape

CSC Implementation Action and Decision

<table>
<thead>
<tr>
<th>PLANNING</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creation of a CSC Plan for state-level activation with input from stakeholders and the public</td>
<td>Implemented by SDMAC during response</td>
</tr>
<tr>
<td>Adoption of CSC plan at the regional level</td>
<td>Implemented by RDMAC as appropriate during response</td>
</tr>
<tr>
<td>Coordination of CSC plans for hospitals, hospital systems, EMS, out-of-hospital providers, public health, emergency management</td>
<td>Implemented by Clinical Coordination Committee (CCC) during response</td>
</tr>
</tbody>
</table>

Where are we going with this?

Declaration of Emergency (PH or Other)

Directive to use CSC

Ethical Principles for CSC

SDMAC serves as state’s expert advisory council

Priorities for Allocation of Medical Resources

Clinical Protocols for CSC (e.g. vents)
## How does CSC activation fit with emergency response?

### Clinical Priorities & Operational Mgmt.

<table>
<thead>
<tr>
<th>Level</th>
<th>Clinical Guidance &amp; Priorities for Allocation</th>
<th>Operational Management &amp; Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATE</td>
<td>Statewide Disaster Medical Advisory Council (SDMAC)</td>
<td>Health Emergency Operation Center (HEOC) State Emergency Operation Center (SEOC)</td>
</tr>
<tr>
<td>REGIONAL</td>
<td>Regional Disaster Medical Advisory Council (RDMAC)</td>
<td>Local Public Health EOCs Local Emergency Management EOCs</td>
</tr>
<tr>
<td>FACILITY</td>
<td>Clinical Care Committee (CCC)</td>
<td>Hospital Command Center (HCC)</td>
</tr>
</tbody>
</table>

## Questions