

# ASPR TRACIE Technical Assistance Request

**Request Receipt Date (by ASPR TRACIE):** 5 January 2022

**Response Date:** 5 January 2022

**Type of TA Request:** Standard

## Request:

The requestor asked ASPR TRACIE for resources related to crisis standards of care (CSC) that are specific to hospice and palliative care.

## Response:

The ASPR TRACIE Team conducted a search of existing ASPR TRACIE resources and online for CSC-related resources specific to hospice and palliative care. In particular, we reviewed the following general (non-COVID-19 related) **ASPR TRACIE Topic Collections:** [Crisis Standards of Care](#), [Homecare and Hospice](#), and [Long-term Care Facilities](#). We also reviewed the following **ASPR TRACIE COVID-19 Specific Topic Collections:** [COVID-19 Crisis Standards of Care Resources](#), and [COVID-19 Home-based Healthcare and Hospice Resources](#).

Resources that are general in nature and not specific to COVID-19 can be found in Section 1, and COVID-19 specific materials can be located in Section II of this document.

## I. General Crisis Standards of Care Resources for Hospice and Palliative Care

Alaska Department of Health and Social Services, Division of Public Health, Rural and Community Health Systems. (2021). [Patient Care Strategies for Scarce Resource Situations](#).

Starting on page 31, this plan provides links to general resources on palliative care and non-pharmacologic interventions. Links to related organizations are also provided. This is followed by a “regional resource card” that covers communications and coordination; space; supplies; staff; special considerations; triage; treatment; and tracking. Steps to take for certain symptoms are also listed at the end of the plan.

Altevogt, B.M., Stroud, C., Hanson, S.L., Hanfling, D., and Gostin, L.O. (eds.). (2009). [Guidance for Establishing Crisis Standards of Care for Use in Disaster Situations](#).

In 2009, the United States (U.S) Department of Health and Human Services (HHS) Office of the Assistant Secretary for Preparedness and Response (ASPR) asked the Institute of Medicine to convene a committee to develop guidance for CSC in disaster situations. This report focuses on the key principles and guidance that can assist public health officials, health care facilities, and others in the development of systematic policies

and protocols that can be applied in a disaster situation with scarce resources. The report includes two scenarios: (1) a sudden-onset, no-notice earthquake, and (2) a slow-onset, pervasive pandemic. **NOTE:** This book has a specific section on Palliative Care Planning for Crisis Standards of Care. A [Letter Report](#) is also available.

Arizona Department of Health Services. (2020). [Arizona Crisis Standards of Care Plan: A Comprehensive and Compassionate Response](#).

This comprehensive plan is the result of years of collaboration between the state public health, healthcare, legal, ethical, and emergency management disciplines and can serve as a model for others. Sections include: Statewide Concept of Operations; Clinical Concept of Operations; Organization and Assignment of Responsibilities; Direction, Control, and Coordination; Information Collection, Analysis, and Dissemination; Communications; Administration, Finance, and Logistics; and Legal Considerations. **NOTE:** A section on Palliative Care and Comfort Care is included in this document.

Centers for Disease Control and Prevention. (2016). [Long-Term, Home Health, and Hospice Care Planning Guide for Public Health Emergencies](#). U.S. Department of Health and Human Services.

This planning guide is geared towards long-term care, homecare, and hospice providers and is comprised of six sections: situational awareness, continuity of operations, facility or agency operations, CSC, staffing, and fatality management.

Idaho Department of Health and Welfare. (2020). [Crisis Standards of Care](#).

This state crisis standards of plan incorporates palliative care/comfort care throughout. It is specifically listed in sections on hospital wards and ambulatory care, and an entire section dedicated palliative care starts on page 30.

Institute of Medicine of the National Academies. (2013). [Out-of-Hospital](#). Crisis Standards of Care: A Toolkit for Indicators and Triggers. (**NOTE:** Resource for purchase).

This section (starting midway through the document) of the Institute of Medicine's widely referenced CSC contains detailed planning information for crisis situations which is broadly applicable to much of homecare disaster planning. The functional checklist at the end of the section may be of particular utility. **NOTE:** The Out-of-Hospital section can be found in Chapter 9 of the toolkit.

Minnesota Department of Health, Center for Emergency Preparedness and Response, Minnesota Healthcare Preparedness Program. (2020). [Patient Care Strategies for Scarce Resource Situations](#).

This card set can help facilitate an orderly approach to resource shortfalls at a healthcare facility. It is a decision support tool to be used by key personnel, along with incident

management, who are familiar with ethical frameworks and processes that underlie these decisions. **NOTE:** This resource includes information on hospice and palliative care.

Rhode Island Department of Health. (2020). [Crisis Standards of Care](#).

In this plan, palliative care is mentioned as an alternative for patients not eligible for a triage assessment (p. 17). Patients who have a medical condition on the terminal condition list or have a high risk of mortality are categorized as “Level 4” (or lowest access/palliate/discharge) in the prioritization section of this plan (p. 18).

Sharpe, V., Berkowitz, K., Cecire, R., et al. (2010). [Meeting the Challenge of Pandemic Influenza: Ethical Guidance for Leaders and Health Care Professionals in the Veterans Health Administration](#). U.S. Department of Veterans Affairs.

This guidance document is divided into five sections on ethical preparedness and response in a healthcare system: 1) an overview of ethical challenges; 2) workforce capacity and responsibility; 3) resource allocation; 4) hospice and palliative care; and 5) limiting personal liberty to preserve public health. The document also includes a checklist for implementing the plan guidance.

## II. COVID-19 Specific Crisis Standards of Care Resources for Hospice and Palliative Care

Abbott, J., Ferraro, K., Johnson, D., et al. (2021). [Colorado Palliative Care and Hospice Crisis Standards: Moving Beyond Critical Care Planning](#). (NOTE: Resource for purchase). *Journal of Pain and Symptom Management*. 61(6), P1287-1296.

This article addresses state and regional gaps identified in planning for scarcity in hospice and palliative care services during the COVID-19 pandemic. It also describes the planning initiatives Colorado has undertaken to address potential scarcities for this group of people.

American Medical Association (AMA). (2020). [Crisis Standards of Care: Guidance from the AMA Code of Medical Ethics](#).

This document highlights guidance from the AMA Code of Medical Ethics relevant to physicians making decisions about the allocation of scarce resources during the COVID-19 pandemic. **NOTE:** Although not specific to hospice and palliative care services, this document may provide useful information for this request.

ASPR TRACIE. (2021). [Experience from the Field: Home Care and Hospice during COVID-19: A Rural Perspective](#).

In rural areas, home care and hospice often go hand in hand. Sue Heitkamp, RN, BSN, President, and Joelle Goldade, RN, BSN, CHPN, COS-C, HCS-D, Director of Clinical Operations (both of CHI Health at Home), shared how they carried out these important services during the COVID-19 pandemic.

ASPR TRACIE. (2021). [Experience from the Field: Hospice and COVID-19](#).

For a profession whose mission is to help terminally ill patients plan their final days and guide them and their loved ones through the passage emotionally and spiritually, a global pandemic presented the ultimate challenge. ASPR TRACIE met with Sarah McSpadden, RN, MSN, MHA, President and Chief Executive Officer of The Elizabeth Hospice, to learn more about her experiences during the COVID-19 pandemic.

ASPR TRACIE. (2020). [Palliative Care in COVID-19 Technical Assistance Response](#).

This ASPR TRACIE technical assistance response details palliative care during the COVID-19 pandemic.

COVID-19 Healthcare Resilience Working Group. (2020). [COVID-19: Considerations, Strategies, and Resources for Crisis Standards of Care in Post-Acute and Long-Term Care \(PALTC\) Facilities](#).

This document provides select healthcare entities (e.g., nursing homes, assisted living facilities, Intermediate Care Facilities for Individuals with Intellectual Disabilities, long-term acute care hospitals, inpatient rehabilitation facilities, and dedicated hospice facilities) an overview of general considerations, potential strategies, and existing resources they may use to inform changes to their COVID-19 related operations and crisis standards of care (CSC) processes. It is intended to complement, not replace, existing state and/or local guidance and plans for implementing CSC.

Hick, J.L., Hanfling, D., Wynia, M., and Toner, E. (2021). [Crisis Standards of Care and COVID-19: What Did We Learn? How Do We Ensure Equity? What Should We Do?](#) The National Academy of Medicine.

Although this discussion paper focuses on hospital application of CSC, it may include information that is useful for hospice and palliative care services.

National Hospice and Palliative Care Organization (NHPCO). (n.d.). [Podcast Episode 88: Crisis Standards of Care](#).

This almost 30-minute podcast discusses NHPCO's newly released Crisis Standards of Care guidance.

National Hospice and Palliative Care Organization. (2020). [Crisis Standards of Care in Hospice & Palliative Care Emergency Management](#).

This document defines and highlights the impact of CSC on palliative and hospice care. It also includes a table with links to state-specific CSC information.