Ethics in Healthcare during Disasters



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FOREWORD

Ethics in Healthcare during Disasters

As we continue to manage the COVID-19 response, healthcare providers across the country are reviewing the lessons learned throughout the pandemic. In addition to the need to quickly adapt to novel pathogens, there is increased attention to incorporating ethical principles of care when resources are strained. So many of you experienced the struggle firsthand in the early phase of the pandemic and during surges, when you had to care for an overwhelming number of patients with limited resources. And later, when treatment and vaccine were made available, equitable access remained a challenge facing healthcare in many communities. The wellness of healthcare providers has been challenged and is now more important than ever in the face of a diminished healthcare workforce. Once again, ASPR recognizes you, our nation's healthcare emergency readiness and response professionals, for working so hard to address these issues, and others simultaneously, in your planning efforts and daily work lives.

Many healthcare organizations and their respective workforces are not "out of the woods;" these challenges continue to arise. In this issue of *The Exchange*, ASPR TRACIE strives to share the most valuable, timely, and helpful information for you and your colleagues on lessons observed and promising practices specific to ethics in healthcare during disasters. The articles in this issue focus on four related categories: general ethics and disaster healthcare; the ethical allocation of COVID-19 treatment and vaccines; crisis standards of care; and patient load balancing that can save lives. The articles in this issue, authored by healthcare response leaders, highlight lessons learned from your colleagues that can help all of us continue to ensure healthcare is provided in the most equitable, ethical ways possible.

I encourage you to visit ASPR TRACIE's <u>Crisis Standards of Care</u> and <u>COVID-19 Crisis Standards of Care</u> Resource Collections and their <u>COVID-19 Patient Surge</u> and <u>Scarce Resource Allocation</u> page.

ASPR TRACIE develops resources in conjunction with partners, stakeholders, and other subject matter experts who have direct experiences in the field. Please <u>share</u> your own promising practices, experiences, or requests for technical assistance about COVID-19 so that others may learn from you. As always, we welcome your feedback.



Richard Hunt MD, FACEP, Senior Medical Advisor for National Healthcare Preparedness Programs, ASPR

WELCOME TO ISSUE 15!

The <u>last issue of The Exchange</u> focused on the impact of civil unrest and workplace violence on healthcare (with articles on healthcare preparation for and response to local civil unrest; trends, policies, and protocols related to workplace violence; and strategies for preventing and responding to violence in the emergency department). As we continue to gather and share lessons learned from the COVID-19 pandemic, we shift our focus back to ethics in healthcare during disasters, crisis standards of care, and patient load balancing to ensure equitable treatment.

ASPR TRACIE has had the honor of working with subject matter experts (SMEs) to gather and share timely information before and throughout the pandemic. We recognize that while plans for disaster health ethics, crisis care, and patient load balancing existed prior to the pandemic, recent challenges encountered by many of our stakeholders highlighted the need to revisit these plans and policies. It is our goal to develop new resources and share with you existing articles, tools, quick sheets, and templates—all vetted by SMEs—that can help you, patients, and visitors stay safe.

Please continue to refer to the <u>National Institutes</u> of Health Coronavirus <u>Disease 2019 (COVID-19)</u> Treatment <u>Guidelines</u>, <u>CDC's Coronavirus webpage</u>, and our <u>COVID-19 page</u> for updates. Your feedback is what makes us successful—please <u>contact us</u> with your comments, questions, technical assistance needs, and resources to share. We look forward to our continued collaboration.

Shayne Brannman, Director, ASPR TRACIE Dr. John L. Hick, Senior Editor

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AT A GLANCE

5 Ethical Dilemmas during and Beyond COVD-19

While ethical dilemmas existed in healthcare prior to the COVID-19 pandemic, this crisis presented healthcare workers with unprecedented challenges during patient surges related to adequate supply (e.g., of personal protective equipment, pharmaceuticals, and other hospital supplies) and ensuring equitable access to treatment and vaccines. ASPR TRACIE met with subject matter experts (SMEs) to learn how they managed ethical challenges during the COVID-19 pandemic and their thoughts on adjusting expectations for the future.

6 Ethical Issues Related to COVID-19 Treatments

Incorporating ethical principles of healthcare when resources are strained is a daily challenge. Healthcare workers across the U.S. had to manage extraordinary patient loads and issues associated with treatment and vaccine distribution throughout the COVID-19 pandemic. ASPR TRACIE met with SMEs from three states to learn more about how they managed ethical challenges during the pandemic and considerations to incorporate in subsequent plans.

7 Crisis Standards of Care and COVID-19

Surges of COVID-19 patients during the pandemic resulted in crisis conditions that placed patients at substantial risk of adverse outcomes in most states. However, states' responses to these conditions differed substantially. Dr. John Hick highlights findings from a related ASPR TRACIE project and areas for future focus.

Medical Operations Coordination Centers/
 Patient Load-Balancing: Summary of Lessons
 Learned during COVID-19

In Spring 2022, ASPR TRACIE reviewed lessons learned from states that utilized a Medical Operations Coordination Center (MOCC) or similar patient loadbalancing effort during the COVID-19 pandemic. This article summarizes key findings from select MOCCs established prior to and during the COVID-19 pandemic and highlights challenges and gaps and potential opportunities/considerations for other jurisdictions interested in establishing MOCCs.





WHAT'S NEW WITH ASPR?

In April 2022, HHS renewed both the <u>COVID-19</u> and <u>opioid</u> Public Health Emergency Declarations; check out the <u>PHE</u> <u>overview</u> and <u>frequently asked questions</u> (FAQ) to learn more.

In early 2022, the Biden Administration deployed medical teams to support the COVID-19 responses in North Carolina and Arizona. In February, HHS purchased 600,000 treatment courses of bebtelovimab, a monoclonal antibody that works against the Omicron variant (the FDA authorized this treatment shortly thereafter). This purchase supported the more than 2.5 million COVID-19 treatments and therapies HHS had already distributed to states in 2022 for Americans who get sick with COVID-19 to use (e.g., antiviral pills, monoclonal antibodies, and pre-exposure prophylaxis therapies for people with compromised immune systems).

In February and March, several new <u>ASPR Boards and Committees</u> held inaugural kickoff meetings (e.g., the National Advisory Committee on Children and Disasters, National Advisory Committee on Individuals with Disabilities and Disasters, and the National Advisory Committee on Seniors and Disasters).

In March, ASPR announced the formulation of the Joint Supply Chain Resilience Working Group, comprised of experts from private industry, academia, and the federal government. This team will offer near-real-time information-sharing and collaboration to tackle steady state and emerging risks and build toward a more agile, visible, and robust U.S. public health supply chain.

In late March, as part of the administration's <u>Test to Treat program</u>, ASPR announced the <u>COVID-19 Treatment Locator</u>, making make it easier for Americans to find Test to Treat locations.

Visit the recently refreshed <u>ASPR homepage</u> and <u>blog</u> and follow us on <u>LinkedIn</u>, <u>Facebook</u>, <u>Twitter</u>, and <u>Instagram</u> to learn more about how ASPR is working to strengthen the nation's ability to prepare for, respond to, and recover from emergencies.



Ethical Dilemmas during and Beyond COVD-19

While ethical dilemmas existed in healthcare prior to the COVID-19 pandemic, this crisis presented healthcare workers with unprecedented challenges during patient surges related to adequate supply (e.g., of personal protective equipment, pharmaceuticals, and other hospital supplies) and ensuring equitable access to treatment and vaccines. ASPR TRACIE met with subject matter experts to learn more about how they managed ethical challenges during the COVID-19 pandemic and their thoughts on adjusting expectations for the future. Access the article to learn more.

RELATED ASPR TRACIE RESOURCES

- Ethics Topic Collection
- COVID-19 Patient Surge and Scarce Resource Allocation
- Drug Shortages and Scarce Resources Page

OTHER RESOURCES

- Making Practical Decisions for Crisis Standards of Care at the Bedside During the COVID-19 Pandemic
- Crisis Standards of Care: Lessons from New York City Hospitals' COVID-19 Experience
- How Hospital Staff Navigate Impossible Ethical Decisions during a COVID Surge





Ethical Issues Related to COVID-19 Treatments

Incorporating ethical principles of healthcare when resources are strained is a daily challenge; healthcare workers across the U.S. had to manage extraordinary patient loads and issues associated with treatment and vaccine distribution throughout the COVID-19 pandemic. Subject matter experts from three states shared how they managed ethical challenges during the pandemic and their thoughts on adjusting expectations for the future. Access the article for more information.

RELATED ASPR TRACIE RESOURCES

- COVID-19 Crisis Standards of Care Resources
- COVID-19 Hospital Resources Collection
- COVID-19 Outpatient Resources
- COVID-19 Patient Surge and Scarce Resource
 Allocation
- COVID-19 Vaccine Resources
- Drug Shortages and Scarce Resources Page

ADDITIONAL RESOURCES

- A Framework for Outpatient Infusion of Antispike
 Monoclonal Antibodies to High-Risk Patients with Mild-to-Moderate Coronavirus Disease-19
- A Proposed Lottery System to Allocate Scarce COVID-19 Medications
- Clinical Prioritization of Antispike Monoclonal Antibody Treatment of Mild to Moderate COVID-19
- COVID-19 Medication Options
- Ethical Allocation Framework for Emerging Treatments of COVID-19

- Model Hospital Policy for Fair Allocation of Scarce Medications to Treat COVID-19
- Monoclonal Antibodies for COVID-19: Mayo Clinic Process and Outcomes
- Monoclonal Antibody Treatment of Breakthrough
 COVID-19 in Fully Vaccinated Individuals with High-Risk Comorbidities
- New System Connects Patients with COVID-19
 Outpatient Treatments
- Weighted Lotteries and the Allocation of Scarce Medications for Covid-19





Crisis Standards of Care and COVID-19

UMMARY

Surges of COVID-19 patients throughout the pandemic resulted in crisis conditions that placed patients at substantial risk of adverse outcomes in most states. However, states' responses to these conditions differed substantially. Dr. John Hick highlights findings from an ASPR TRACIE review of Crisis Standards of Care declarations, media accounts of crisis conditions at healthcare facilities, and information collected from the field. Access the entire article to learn more.

RELATED ASPR TRACIE RESOURCES

- ASPR TRACIE TA Patient Surge Management Strategies and CSC during COVID-19
- COVID-19 Patient Surge and Scarce Resource Allocation
- Crisis Standards of Care and COVID-19: What's Working and What Isn't (Webinar)
- Crisis Standards of Care and Infectious Disease Planning
- Crisis Standards of Care during COVID-19: Summary of State Actions
- Crisis Standards of Care Terminology and Legal Resources
- Hospital Operations Toolkit for COVID-19
- Innovations in COVID-19 Patient Surge Management
- Innovations in COVID-19 Patient Surge Management (Tip Sheet)
- Medical Operations Coordination Cells Toolkit (Second Edition)

ADDITIONAL RESOURCES

- Association Between Caseload Surge and COVID-19 Survival in 558 US Hospitals, March to August 2020
- Duty to Plan: Health Care, Crisis Standards of Care, and Novel Coronavirus SARS-CoV-2
- Hospital Planning for Contingency and Crisis Conditions: Crisis Standards of Care Lessons from COVID-19





Medical Operations Coordination Centers/Patient Load-**Balancing: Summary of Lessons Learned during COVID-19**

In Spring 2022, ASPR TRACIE reviewed lessons learned from states that utilized a Medical Operations Coordination Center (MOCC) or similar patient load-balancing effort during the COVID-19 pandemic. This article summarizes key findings from select MOCCs established prior to and during the COVID-19 pandemic and highlights challenges and gaps and potential opportunities/considerations for other jurisdictions establishing MOCCs in the future. Learn more by accessing the entire article.

RELATED ASPR TRACIE RESOURCES

- Establishing MOCCs for COVID-19 (Webinar)
- Healthcare Coalition MOCC Resource Assessments (TA Response)
- Excess Mortality and COVID-19 Surges: Defining the Problem and Solutions (Speaker Series Recording)
- Medical Operations Coordination Cells Toolkit (Second Edition)

ADDITIONAL RESOURCES

- Association Between Caseload Surge and COVID-19 Survival in 558 US Hospitals, March to August 2020
- **EMS Supplement for MOCC Toolkit**
- How to Set Up a Regional Medical Operations Center to Manage the COVID-19 Pandemic
- Key Considerations for Transferring Patients to Relief Healthcare Facilities when Responding to Community Transmission of COVID-19 in the United States
- Regional COVID-19 Coordination Center Overview
- The Role of a Statewide Critical Care Coordination Center in the Coronavirus Disease 2019 Pandemic-and Beyond
- Western Washington State COVID-19 Experience: Keys to Flattening the Curve and Effective Health System Response



RECOMMENDED RESOURCES



Since the last issue of *The Exchange* was published, ASPR TRACIE created two new comprehensively developed Topic Collections: Climate Change and Healthcare System Considerations and Disasters and Healthcare Disparity and refreshed several others. We continue to maintain our 20 COVID-19 Healthcare Planning Resource Collections; check back often. You can also learn more about rating, commenting on, and saving resources in this short tutorial.



We encourage you to review our hundreds of requests for <u>COVID-19-specific technical assistance</u> (TA) and our <u>summary of responses to select TA requests</u>. <u>Check out this tutorial</u> for assistance navigating the Assistance Center.



Check out the <u>COVID-19 threads in the Information</u> <u>Exchange</u> (IE) to access what your colleagues are sharing and provide feedback. Don't have an account? <u>Register for the IE today</u>, where you can share your opinions and resources with us and your colleagues. <u>Access our quick tutorial</u> for help with registration.



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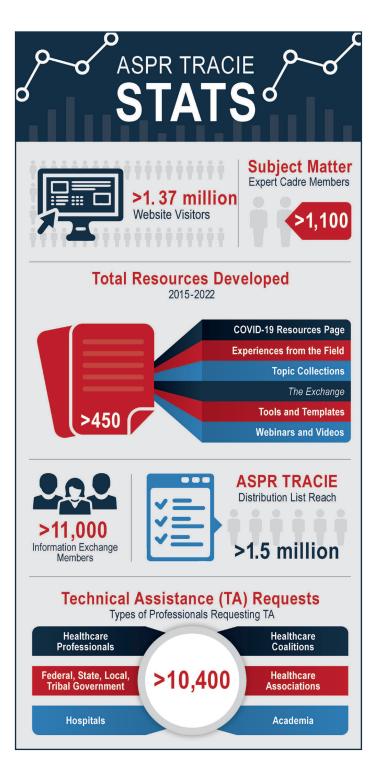
Your Healthcare Emergency Preparedness Information Gateway

The Exchange is produced by the Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, and Information Exchange (TRACIE). Through the pages of The Exchange, emergency health professionals share firsthand experiences, information, and resources while examining the disaster medicine, healthcare system preparedness, and public health emergency preparedness issues that are important to the field. To receive The Exchange, visit https://asprtracie.hhs.gov/register and enter your email address.

ASPR TRACIE was created to meet the information and technical assistance needs of ASPR staff, healthcare coalitions, healthcare entities, healthcare providers, emergency managers, public health practitioners, and others working in disaster medicine, healthcare system preparedness, and public health emergency preparedness. The infographic illustrates ASPR TRACIE's reach since launching in September 2015.







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