"Crisis Standards of Care"

A Community Conversation

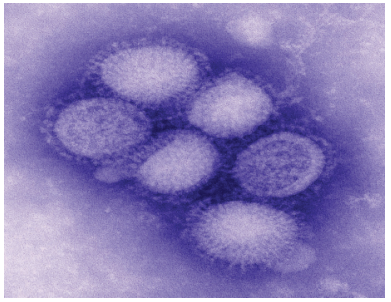
[Location]
[Date]

[Sponsor]

"Disaster" Defined

What do disasters have *in common?*

- People's needs exceed available resources
- Help cannot arrive fast enough



How do disasters differ?

- Some are long-lasting and widespread *(flu pandemic)*
- Others are sudden and geographically limited *(earthquake, terrorist attack)*

Preparing for Disasters: *The Challenge*

- Disasters can lead to shortages of critical medical resources
- Shortages require hard decisions, *for example*—
  - Who should be at the front of the line for vaccines or antiviral drugs?
  - Which patients should receive lifesaving ventilators or blood?
- In extreme cases, some people will not receive all of the treatment they need

How do we give the best care possible under the worst possible circumstances?

Recent Examples

Hurricane Katrina

- Hospital overload

H1N1 Pandemic

- Vaccine shortage

The Response: "Crisis Standards of Care"

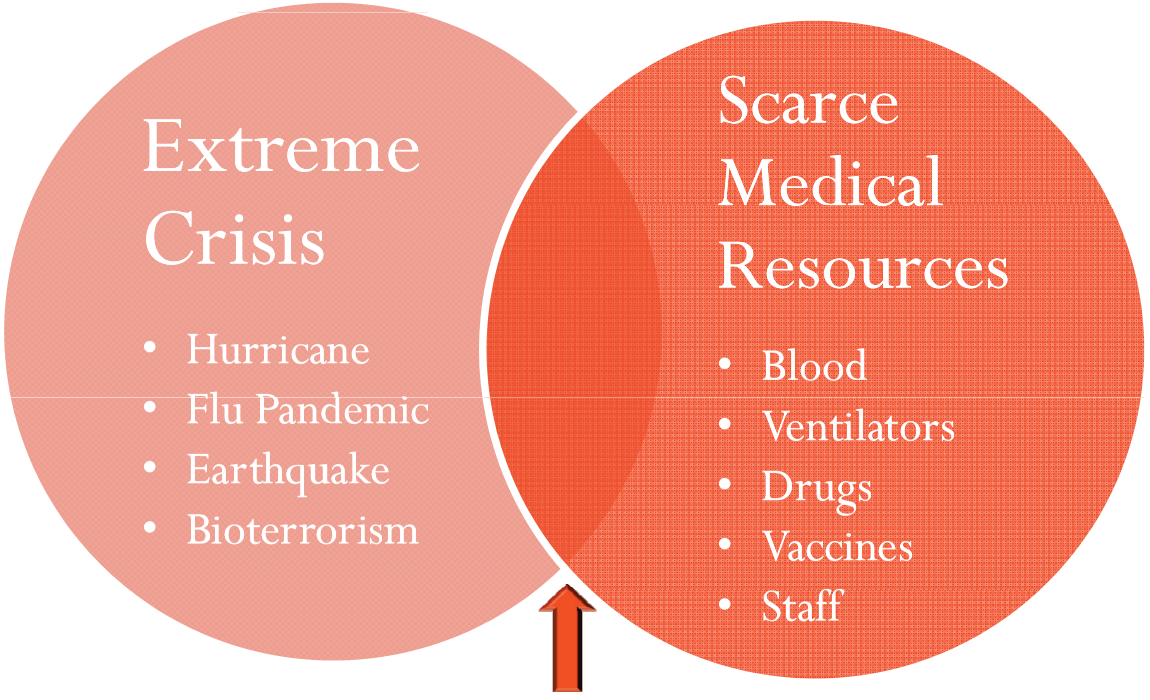
Guidelines developed **before disaster strikes**—

To help healthcare providers decide how to administer…

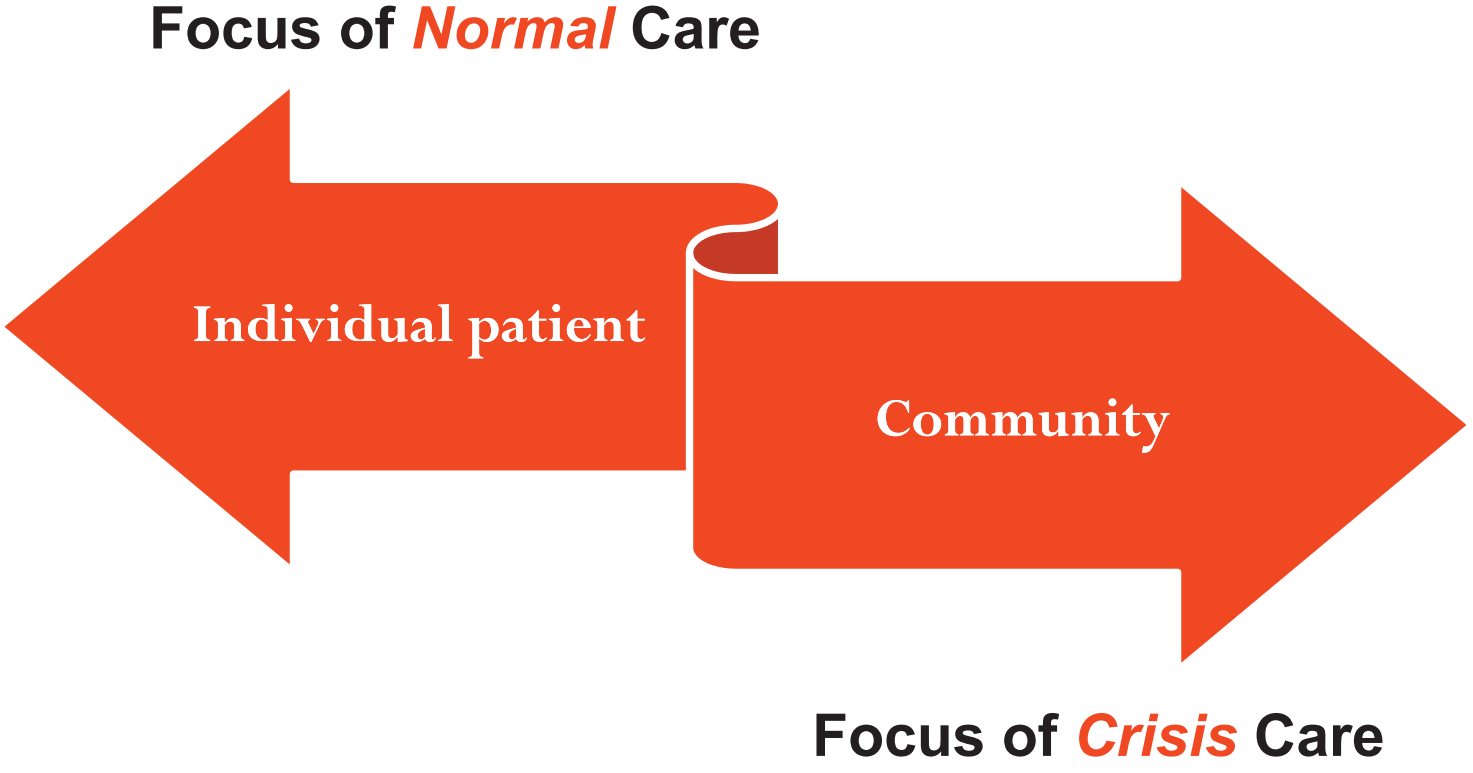
THE BEST POSSIBLE MEDICAL CARE

…when there are not enough resources to give all patients the level of care they would receive under normal circumstances.

When Might We Need Crisis Standards of Care?



How Are Crisis Standards of Care Different?

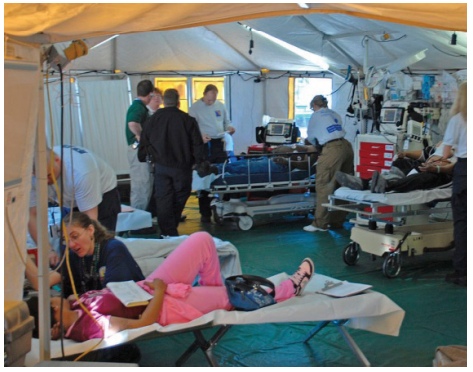


Possible Reasons for Crisis Standards of Care

- To make sure that critical resources go to those who will benefit the most
- To prevent hoarding and overuse of limited resources
- To conserve limited resources so more people can get the care they need
- To minimize discrimination against vulnerable groups
- So all people can trust that they will have fair access to the best possible care under the circumstances

Possible Strategies to Maximize Care

- **Space**
  - Put patient beds in hallways, conference rooms, tents
  - Use operating rooms only for urgent cases
- **Supplies**
  - Sterilize and reuse disposable equipment
  - Limit drugs/vaccines/ventilators to patients most likely to benefit
  - Prioritize comfort care for patients who will die
- **Staff**
  - Have nurses provide some care that doctors usually would provide
  - Have family members help with feeding and other basic patient tasks



When there isn't enough to save everyone... how should we decide who gets what?

Some options--

1. First-come, first-served?
2. Lottery?
3. Save the most lives possible by giving more care to people who need it the most?
4. Favor certain groups?
   - The old OR the young?
   - Healthcare workers and other emergency responders?
   - Workers who keep society running (utility workers, transportation workers, etc.)?

Where Do *You* Come In?

Community Conversations help policy makers:

- **Understand community concerns about** the use of limited medical resources during disasters
- **Develop crisis standards of care guidelines** that reflect ***community values and priorities***

Preparing for Disaster

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