

COVID-19 Best Practice Information: Requesting Medical Resources

Introduction

Response to the coronavirus is necessitating a whole of community and whole of nation response. For the most updated health-related guidance and information on coronavirus disease (COVID-19), please visit www.coronavirus.gov. This document is one of a series designed to facilitate the sharing of best practices from previous disaster events combined with the experiences of communities that have already faced COVID-19 challenges. It highlights some key areas where communities could benefit from learning from the experiences of others and was developed by subject matter experts. Information will be updated as the Federal Emergency Management Agency (FEMA) learns more about community best practices.

Background

- There is an increasing shortage of medical resources to support COVID-19 operations in local and state communities. These shortages are being seen at different levels across the nation as the COVID-19 public health emergency evolves and deepens. In order to maximize public health and medical resources and capacity in the United States, jurisdictions must exercise crisis standards of care, prioritize the employment of health care resources, and develop and implement innovative health care practices.
- The following is a list of best practice considerations as they relate to ongoing COVID-19 operations across the country. These are best practices for consideration and do not constitute and should not be considered as guidance in any way.

Key Considerations

- The application of local and state plans and the corresponding resources is important. It is necessary for jurisdictions to build resource prioritization matrices and consider what altered standards should be applied.
- The Strategic National Stockpile does not have sufficient resources to meet all needs across states and localities.
- Mitigation strategies and plans to reduce the number of COVID-19 cases in a jurisdiction are paramount to attempt to minimize the rise of cases that require more resources, or intensive resources.



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Considerations Related to COVID-19 State and Local Actions

Prevent Transmission

- Jurisdictions should consider how to reduce the likelihood that they are infected. Considerations should include protective measures to prevent or slow the community transmission of COVID-19 such as:
 - Restrict public gatherings, close locations, issue “stay at home” orders and “essential business limitations,” and institute other actions that limit residents’ exposure to COVID-19.
 - Innovative measures at the local and state level that slow the transmission.
 - Consider the use of facilities, like hotels, to isolate individuals who tested positive, but are asymptomatic or have mild symptoms, and at risk of transmitting to vulnerable populations including older adults, palliative care, children/adolescents.
 - Assess available testing diagnostics trends and available data to inform local populations of risk (e.g. hot spots) and taking appropriate action to reduce the likelihood of exposure.

Prioritize Health Resources

- Jurisdictions should consider what resources could be saved from non-essential medical services, altered care levels or extending the regular use of resources, which could include:
 - Determine what non-essential medical services can be canceled or postponed, such as elective surgeries, to reduce the usage of important resources and supplies.
 - Examine if lower acuity patients could be transferred to home and community-based care, step-down units or alternative care facilities, or facilities with less resource demand.
 - Identify which health and medical resources may be reused or have their use extended, and reducing how frequently they need to be replaced.

Maximize use of Existing Resources

- Jurisdictions should evaluate if they have used all available resources at their disposal, which could include:
 - Identify whether hospital beds and other medical care facilities across the jurisdiction are fully utilized, and are at or nearing 100% in the coming days.
 - Define and implement crisis standards of care related to regulations, licensing, training, and practice that could yield broader access to resources.
 - Determine what federal regulatory or licensing requirement waivers should be requested.
 - Use healthcare coalitions to maximize cooperative planning, information sharing, management coordination, and provision of healthcare services.
 - Reposition medical personnel, facilities and/or equipment to areas with the highest need from those with limited effects.
 - Identify whether there are jurisdiction or contract assets for inter- and intra-state patient movement and redistribution of non-COVID-19 patients to health care facilities with less demand and existing capacity.

- Determine if neighboring states could provide mutual aid support for medical capacity.
- Identify whether regional strategies or plans can aid in identifying resources and prioritizing across jurisdictions.

Expand Available Health Resources

- Jurisdictions should consider non-traditional resources to meet requirements for facilities and staffing, which could include:
 - Examine contracts for temporary commercial medical facilities.
 - Identify whether existing buildings like warehouses, hotels/motels, athletic facilities, state/locally owned or managed office complexes and other locations, could serve as alternate care facilities or resources for housing COVID-19 positive/asymptomatic populations.
 - Determine whether any closed medical facilities such as hospitals, mental institutions, nursing homes, or clinics could be reopened to serve as alternate care facilities.
 - Identify whether staffing resources could be expanded through flexible approaches like using medical school students, considering non-governmental organization (NGO) staff or volunteers, or volunteer clinicians.
 - Consider whether restaurants and dry cleaners/laundromats can support ancillary care to alternate care facilities to meet staff/patient needs
 - Consider whether medical reserve personnel could be called to duty or if there are retired doctors or medical staff that would be willing to be reinstated. Consider the legal requirements and processes that would be used to swiftly approve these individuals working in those roles.

Innovative Health Practices

- Jurisdictions should consider innovative approaches to treating COVID-19 patients that reduce the need for supplies, facilities, and staff. These could include:
 - Implement telehealth or telemedicine for non-urgent medical needs, allowing staff to assess patients remotely.
 - Develop community-based health care delivery that would allow doctors to practice from their homes or through safe home visits with appropriate supplies to assess and treat patients.
 - Apply technology to assist with pre-visit health assessments or other documentation that could reduce the time a patient is at a facility.