COVID-19 Pandemic
Healthcare Surge Strategies Framework

Glossary

ASC – Ambulatory Surgery Center

CMS – Centers for Medicare and Medicaid Services

DOH – Washington State Department of Health

DSHS – Washington State Department of Social and Health Services

EM – Emergency Management

EMD – Washington State Emergency Management Division

EMS – Emergency Medical Services

EOC – Emergency Operations Center

ESF-8 – Emergency Support Function 8: Health and Medical

FDA/CBER – Food and Drug Agency/Center for Biologics Evaluation and Research

HCC – Healthcare Coalition

HECC – Healthcare Emergency Coordination Center at the Northwest Healthcare Response Network

ICU – Intensive Care Unit

JIC – Joint Information Center

LHJ – Local Health Jurisdiction

LTC – Long-term Care

NPI – Non-Pharmaceutical Interventions

NWHRN – Northwest Healthcare Response Network

PPE – Personal Protective Equipment

SEOC – State Emergency Operations Center

WMCC – Washington Medical Coordination Center

WSHA – Washington State Hospital Association

Overview

The novel coronavirus (COVID-19) pandemic has significantly affected the healthcare delivery system due to significant associated morbidity and mortality, patient surge, occupational and community transmission risk, supply chain shortages, and additional cascading impacts.

An effective healthcare delivery system ensures the continuity of patient care services during a significant emergency or incident. This requires a healthcare delivery system that anticipates and prepares for disruptions in supplies, staffing, and facility operations, shares operational information amongst healthcare and response entities, as well as understands that system vulnerabilities often transcend traditional sectoral and geopolitical boundaries, and thus must communicate and coordinate with organizations and agencies outside of normal day-to-day operations.

Although non-pharmaceutical interventions and government support have bolstered healthcare's ability to effectively respond to patient surges, the integration and alignment of healthcare pandemic surge strategies across healthcare organizations, public health agencies and other response agency partners is essential for a cohesive and comprehensive regional healthcare pandemic response.

Scope and Concept

The COVID-19 Pandemic Healthcare Surge Strategies Framework was developed by the Northwest Healthcare Response Network (NWHRN) as a regional guide for identifying healthcare delivery system-specific response roles, opportunities for cross-sectoral and multi-jurisdictional coordination and collaboration, and recommended actions to decrease the burden of anticipated or actual patient surge incidents and support novel response tactics. This framework is intended to complement, not supersede public health, clinical, and regulatory guidance, and should not be considered exhaustive. The listed response actions in this framework come from a variety of sources including, but not limited to healthcare and response agency feedback, subject matter expert recommendations, and identified best practices and lessons learned.

Operationalization

The recommended actions listed in this framework are categorized by a pandemic phase typology (source: WHO & CDC risk assessment guidance) which aligns with the emergency management response phases [see figure 1]. This supports the integration and alignment of healthcare, public health, and emergency response agencies. In the figure below, the pandemic phases (and associated recommended actions) are coupled with a distinct segment of an epidemiologic curve, while overlapping and blend into the prior and later phases. More information on the emergency management phases can be found here.

Overlapping phases supports forward planning, effective recovery activities, while providing greater flexibility for organizations based on the unique pandemic impacts to their operations. By treating each pandemic wave as a distinct incident supports healthcare organizations continuously evaluate and improve pandemic response plans and operations while aligning response activation-level and actions with the unique regional epidemiological curve. County-specific epidemiologic curves can be found on the DOH COVID-19 Data Dashboard.

Figure 1. Pandemic Phases [source: WHO and CDC]
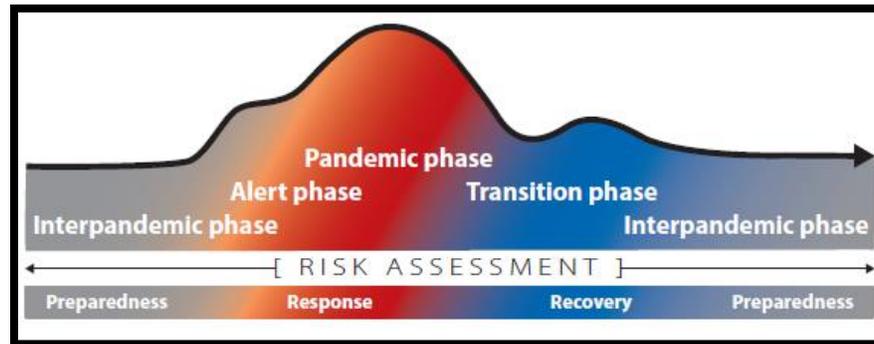
Healthcare Coalition

The Northwest Healthcare Response Network (NWHRN) is the Western Washington Health Coalition. Healthcare Coalitions are defined as "groups [comprised of both] individual health care and response organizations (e.g., hospitals, EMS, emergency management organizations, public health agencies, etc.) in a defined geographic location that play a critical role in developing health care delivery system preparedness and response capabilities." [source] The NWHRN leads the facilitation of healthcare response coordination across the 15 county and 25 tribal sovereign nation service area designated by the State. During COVID-19, NWHRN supports Coalition partners by leading collaborative efforts to address challenges at facilities, within county jurisdictions, cross-jurisdictionally, and in connection with the statewide response.

Response Activities

- 24/7 Duty Officer line: 425-988-2897
- Situational awareness gathering and dissemination
- Support and facilitate response coordination across the coalition region
- Coordination of healthcare resource requests
- Support patient movement between healthcare facilities to enable level-loading and appropriate placement of patients
- Implement and coordinate patient tracking between healthcare facilities
- Facilitate the development of clinical and policy recommendations
- Collect and analyze vital healthcare data
- Represent healthcare in response agency EOCs under emergency support function 8 (ESF-8) at local and/or state level

Washington Medical Coordination Center (WMCC)

The WMCC, based out of Harborview Medical Center, is a 24/7 statewide coordinating center which supports hospital decompression and the transfer of people living in congregate facilities to acute care. The WMCC is not meant to take precedence over standard patient placement protocols; instead, it serves to complement, and support facility transfer protocols when facilities are overwhelmed, and the traditional patient placement and transfer processes are not sufficient. The healthcare coalition supports the WMCC via triaging phone calls, situational awareness gathering, convening coordination calls, and gathering/analyzing data. More information on the WMCC can be found here.