

Regional COVID-19 Coordination Center

24/7 Availability: 206-520-7222 | 877-520-7222

Based at the Northwest Healthcare Response Network & Harborview Medical Center

Overview and Purpose

The Regional COVID-19 Coordination Center (RC3) is established based on the Disaster Medical Coordination Center model to triage and place COVID-19 patients requiring acute emergency department or inpatient hospital care in an equitable manner. It is designed to balance patient placement and transport to individual or multiple hospitals with sufficient capacity in order not to strain the resources of any single hospital or small group of hospitals.

Scope

The RC3 is designed to place patients from any long-term care, hospital or similar facility requiring non-emergency transfer considerations to acute care hospitals. The goal is to place several patients at one time; however, the RC3 can assist smaller facilities place fewer patients as resources allow. The Center will also serve as a coordination hub for decompressing hospitals at or beyond capacity by placing patients from impacted acute care hospitals to similar settings as requested. The RC3 is not meant to take precedence over standard patient placement protocols such as transfer centers.

The RC3 operates across western Washington with the understanding and intent to serve as part of a state-wide coordination effort. The RC3 will work with the eastern Washington REDi Healthcare Coalition and DMCCs to support patient movement between coalition regions, as needed. The RC3 is not designed to advise existing EMS agencies regarding patient placement from a non-healthcare facility incident scene or 9-1-1 dispatch scenario.

The RC3's guiding framework and operations will be reviewed regularly for quality assurance purposes.

Coordination & Clinical Guidance

The RC3 is led by Harborview Medical Center (Seattle, WA) in conjunction with the University of Washington Medicine Transfer Center in close partnership with the Northwest Healthcare Response Network (NWHRN). It is supported by the Washington State Department of Health, local health jurisdictions, EMS agencies, emergency management departments, and healthcare systems and facilities throughout Washington State.

The Northwest Healthcare Response Network (NWHRN) will support RC3 operations by serving as need as the first point of contact for RC3 calls, providing, or ensuring provision of, regular and timely situational awareness updates/data to facilitate patient placement. The NWHRN will convene regular meetings with the RC3 and any relevant partners to:

- review recent patient placements and support continued operations



- assess regional patient coordination challenges and potential solutions
- convene partners such as hospitals to coordinate immediate or possible patient placement needs
- align resource sharing and facilitate mutual aid, as appropriate

In addition, the NWHRN will support RC3 connections with local health jurisdictions, emergency management organizations, Washington Department of Social and Health Services and Washington State Department of Health.

Partner Agreement

To successfully implement the RC3's mission, hospitals (acute care, specialty, and critical access) and long-term care facilities (skilled nursing, hospice, etc.) throughout Washington state agree to the following principles:

- All acute care and critical access hospitals will accept confirmed or suspected COVID-19 patients
- It is understood that bed placement and capacity is a complex multifactorial process. But in times of actualized or possible medical surge, all facilities agree to minimize the number of "reserved" or "closed" beds to that necessary to support critical function (e.g. trauma beds)
- Recognizing the importance of surge capacity, all facilities will fully utilize licensed beds and maximize any additional surge capacity. This includes AIIR, negative pressure rooms and instituting cohorting principles to maximize surge capacity.
- All long-term care facilities will continue to use private EMS or 9-1-1 emergency services for emergency patient transport.
- All healthcare facilities with access to WATrac will regularly input data into the system.
- All hospitals will regularly input data into WA HEALTH at directed intervals.
- All healthcare facilities will respond to on-demand RC3 data requests for information in a rapid and timely manner to support situational awareness.
- Healthcare facilities seeking RC3 assistance will establish communication with RC3 personnel as early as possible, and will provide redundant contact information, patient acuity and other key data points.
- All initiating facilities and receiving hospitals agree that patients may need to travel long distances in order align with the fair and equitable process outlined above.
- All healthcare facilities will provide two points of contact to the RC3. These contacts must allow for 24/7 coverage and have the authority to accept patient transfers.
- The RC3 will bear no financial responsibility for patient placement, transfer or transport.
- All EMS arrangements and directions will be managed by the individual facilities not by RC3.