

Ensuring capacity and coordination to care for Washington kids

The Challenge

At least 25% of the population of the state of Washington is under the age of 18. At a time when pediatric and adult hospital resources were already limited, the country was faced with a collision of respiratory syncytial virus (RSV), influenza and coronavirus in our pediatric population, a pediatric “triple-demic”. Pediatric patients have specific care needs and there are limited resources within Washington state. The Network needed to work with our partners to ensure our state could sustain and maximize pediatric care during a crisis and surge.

Background

The Northwest Healthcare Response Network (the Network) has a long history of focus on pediatric disaster readiness and over the years has been building and investing in tools, trainings, and relationships amongst Washington state pediatric providers.

The Network has led a variety of pediatric planning and training initiatives for more than a decade. This includes establishing a dedicated pediatric workgroup, composed of subject matter experts and providers from across the region who have worked together on pediatric disaster readiness for many years. This became critical during the early days of COVID, when the Network expanded their pediatric surge work group membership and continued to meet on a regular basis to exchange information and begin to collaborate on efforts in Washington.

IMPACT FOCUS

Multi-Agency Coordination

Information Sharing

Medical Surge

THE ROLE OF THE NETWORK

- **Convening clinical expertise:** Long standing relationships and collaboration among clinicians built through the Network’s decade’s long focus on pediatric disaster readiness led to clinical coordination, innovation and problem-solving throughout the crisis.
- **Data coordination and management:** The Network coordinated and sourced essential data and information that is vital to assessing pediatric acute care needs, capacity and supporting ongoing pediatric care, -response and surge capability.
- **Multi-agency coordination:** The Network coordinated among hospitals across the state, the Washington Medical Coordination Center and other emergency response partners to identify response capacity needs and to develop and implement capabilities and to advocate for policies and resources to support pediatric care.



Creating a common operating picture leads to new capabilities

The pediatric work group's effort focused first on creating a common operating picture so that providers could have a shared understanding of pediatric capacity and needs. This resulted in developing new tools to share situational awareness because the existing systems within the state were not meeting the need of pediatric providers during the initial months of COVID. This collective need was met with an initial effort to create a rudimentary spreadsheet to track more specific pediatric focused data on bed capacity information. As the value of this information became more evident, the Network convened and coordinated a group of subject matter experts in Fall 2021 to build out the functionality to track pediatric bed availability on WATrac. This enhanced information sharing was not only key for addressing potential capacity issues, but also for providers to begin to assess trends.

As things evolved in the summer of 2022, providers began to see the increasing impacts on pediatric capacity during an early RSV wave. The data this team of clinical subject matter experts was tracking and discussing on a regular basis began to cause alarm amongst providers. Dr. Mary King, UW-Medicine Harborview Medical Center Pediatric Intensive Care Unit (PICU) Director shared, "Without that forum for data and communication, we would not have recognized the urgency of the situation. We knew both quantitatively and qualitatively that something was changing this fall [2022]."

These trends prompted the Network to lead the just-in-time development of a critical new pediatric capability within the Washington Medical Coordination Center (WMCC) in November 2022. This new capability ensured that children needing critical life saving services were able to receive the right level of care at the right time across the state. This was vital given the limited number of pediatric resources in Washington, such as Pediatric Intensive Care Unit beds. The integration of pediatric capabilities within the WMCC also provided expanded knowledge to enhance situational awareness around pediatric capacity and needs.

"The Network was able to leverage their relationships and the processes that had been undertaken for adult patients at the WMCC to build and layer in the pediatric relationships in a rapid process to bring together hospital leaders and stakeholders. This allowed for the expanded capacity to meet the needs of clinicians across the state. Without a doubt, the addition of the pediatric functionality to the WMCC saved lives." - Dr. Mary King, UW-Medicine Harborview Medical Center

THE WMCC

The Washington Medical Coordination Center is an asset to the entire state of Washington.

WMCC was initially established to triage and place COVID-19 and related patients requiring acute hospital care in an equitable manner across Washington.

Between June 2020 and April 2023, the WMCC has received more than **8300** requests for adult and pediatric transfers.

Between November 2022 and January 2023, there were **187** requests for pediatric patient transfers. **136** of these requests have resulted in pediatric patient placement.



New capabilities save lives

The addition of the pediatric capability within the WMCC also allowed for enhanced data and information sharing across the state. By sharing pediatric transfer request to the WMCC as well as pediatric bed availability on WATrac with providers, the Network nimbly led problem solving related to the emergent challenges and gaps in critical capacity for kids.

As an example, healthcare systems within Washington were able to adjust policies at their hospitals to accept infants that under normal circumstances would not be admitted back into the Neonatal Intensive Care Unit (NICU). These infants met a list of criteria as reviewed by hospital teams to readmit when safely possible. The Network coordinated this request to pediatric clinical leaders to launch a cohesive response across Washington to care for our most vulnerable patients. The Network would not be able to coordinate such efforts without the willingness of our hospital systems to work collaboratively in times of crisis.

“These will be tools that we will now have at the beginning of any event. The data we gathered previously and now through the WMCC is invaluable.”

Dr. Brianna Enriquez

Medical Director, Emergency Management, Seattle Children’s



Additionally, the subject matter expertise within the Network’s pediatric workgroup allowed hospitals to adapt to the patient demand and supported the creation of valuable tools needed for addressing pediatric surge and need for patient load balancing. The Network was able to leverage its pre-existing toolkit built for pediatric surge and provide updates to support real time needs. This toolkit was shared broadly with non-pediatric hospitals to enhance their own surge capacity planning. This was the first time this toolkit was used during a response. It provided guidance and tools to help non-pediatric hospitals to understand the unique challenges when facing a pediatric surge and develop strategies to implement the recommended solutions.

Throughout all of the challenges and a continued response structure that had been active throughout the COVID pandemic and remains active still, the importance of relationship building, trust and the need for subject matter experts in specialty services, such as pediatrics, is paramount to the Network’s ability to serve as a leader to coordinate patient care.

PREPARE. RESPOND. RECOVER.