

Emergency Preparedness: States Are Planning for Medical Surge, but Could Benefit from Shared Guidance for Allocating Scarce Medical Resources, GAO-08-668, June 2008

National Healthcare Preparedness Evaluation &
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Introduction

- Potential terrorist attacks and the possibility of naturally occurring disease outbreaks have raised concerns about the ability of the nation's health care systems to respond to mass casualty events.
- Following a mass casualty event, health care systems would need the ability to “surge,” that is, to adequately care for a large number of patients or patients with unusual or highly specialized medical needs.

Objectives

- As a result of the nation's need to prepare for potential terrorist attacks, naturally occurring disease outbreaks, or other natural disasters, members of the Congress asked GAO to undertake a study regarding the nation's preparedness for a mass casualty event. GAO examined
 1. what states have done to prepare for medical surge and
 2. concerns states have identified related to medical surge.

Scope and Methodology

- To conduct our work,
 - we reviewed documents from the 50 states and federal agencies, including the 2006 and 2007 Office of the Assistant Secretary for Preparedness and Response's Hospital Preparedness Program cooperative agreement applications and 2006 midyear progress reports (the most current available information at the time of our data collection) for the 50 states.
 - we interviewed officials from a judgmental sample of 20 states and from federal agencies, as well as emergency preparedness experts.
- Our work is current through May 2008.

Background

- We identified four key components of preparing for medical surge in a mass casualty event:
 1. increasing hospital capacity,
 2. identifying alternate care sites,
 3. registering medical volunteers, and
 4. planning for altering established standards of care.

Results

1. Many states have made efforts to increase hospital capacity, plan for alternate care sites, and develop electronic medical volunteer registries, but fewer have planned for altered standards of care.
2. States reported concerns related to all four key components when preparing for medical surge.

1: Many States Have Made Efforts Related to Three of the Key Components of Medical Surge, but Fewer Have Implemented the Fourth

- All states were making efforts to expand hospital capacity.
 - More than half the states met or were close to meeting the criteria for the five surge-related sentinel indicators for hospital capacity that we reviewed from the Hospital Preparedness Program 2006 midyear progress reports.
 - In our 20-state review, we found that all were developing bed reporting systems and almost all of the states with DOD and VA hospitals were engaging in various levels of coordination with those hospitals in an effort to expand their hospital capacity.

1: States' Efforts (cont.)

- Of the 20 states we reviewed,
 - 18 reported that they were in the process of selecting alternate care sites that used either fixed or mobile medical facilities, and
 - 15 of the 20 states had begun registering volunteers in electronic medical volunteer registries,
 - 7 of the 20 states had adopted or were drafting altered standards of care for specific medical interventions to be used in response to a mass casualty event.

2: States Reported Concerns Related to All Four Key Components When Preparing for Medical Surge

- State officials in our 20-state review reported that they faced challenges relating to all four key components in preparing for medical surge including
 - maintaining adequate staffing levels to increase hospital capacity,
 - and reimbursement for alternate care site services.

2: States' Concerns (cont.)

- Some states reported that they had not begun work on or completed altered standards of care guidelines due to the difficulty of addressing the medical, ethical, and legal issues involved in making life-or-death decisions about which patients would get access to scarce resources.
- While most of the states that had adopted or were drafting altered standards of care guidelines reported using federal guidance as they developed these guidelines, some states also reported that they needed additional assistance.

Agency Comments

- In commenting on this draft, HHS concurred with our findings and said our report was a fair representation of the progress that has been made to improve medical surge capacity.
- The Departments of Homeland Security, Defense, and Veterans Affairs also concurred with our findings.

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