

Vulnerable Populations in Crisis Situations

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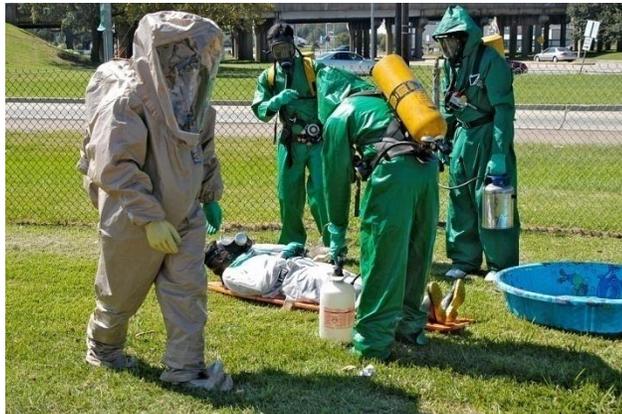
Objectives

- Discuss disasters and the care continuum
- Define vulnerable populations (“at risk”)
- Introduce the IOM 2009/2012 crisis standards of care idea
- Discuss a framework for making difficult decisions

Disasters “Defined”

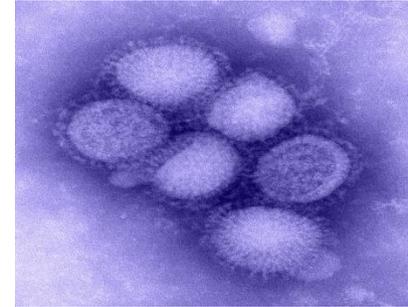
What do disasters have in common?

- People’s needs exceed available resources
- Help cannot arrive fast enough



How do disasters differ?

- Some are long-lasting and widespread (*flu pandemic*)
- Others are sudden and geographically limited (*earthquake, terrorist attack*)



Vulnerable Populations- Who is “at risk”?

- Definition

- those who are not able to access and use the standard resources
- a group of people who share a characteristic that causes each member to be susceptible to a particular event
 - Age, class, race, poverty, language, and a host of other social, cultural, economic, and psychological factors may be relevant

What are examples of vulnerable populations? Sub-populations?

Preparing for Disasters: *The Challenge*

- Disasters can lead to shortages of critical medical resources
- Shortages require hard decisions, *for example*—
 - Who should be at the front of the line for vaccines or antiviral drugs?
 - Which patients should receive lifesaving ventilators or blood?
- In extreme cases, some people will not receive all of the treatment they need

How do we give the best care possible under the worst possible circumstances?

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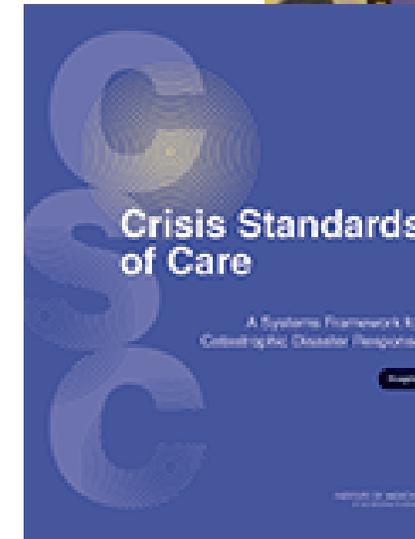
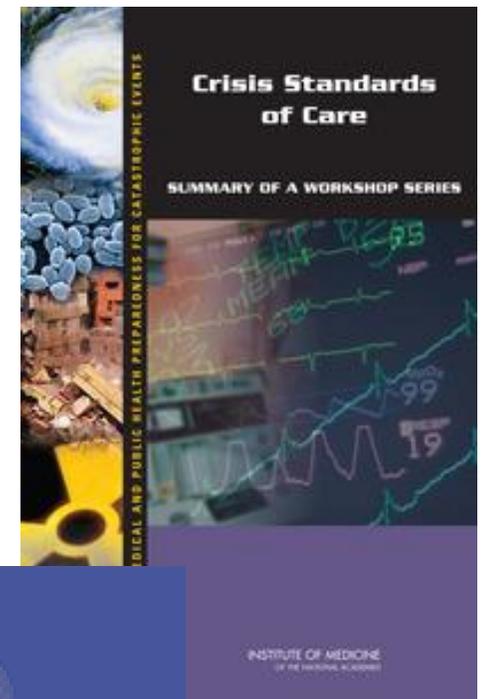
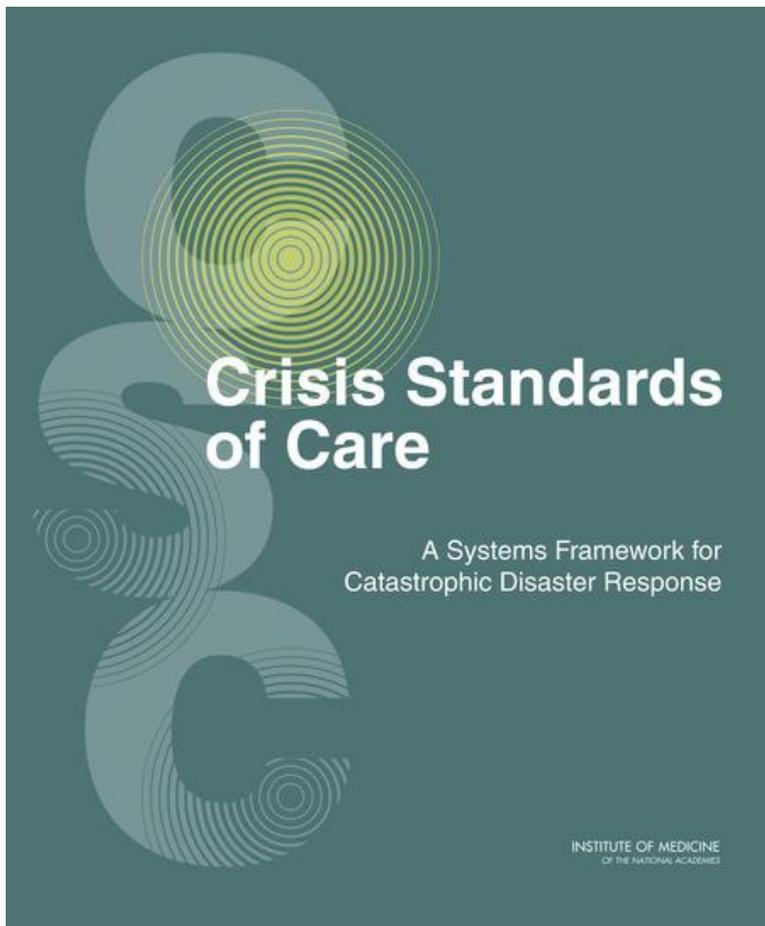
The Response: “Crisis Standards of Care”

Guidelines developed before disaster strikes—

To help healthcare providers decide how to administer...

THE BEST POSSIBLE MEDICAL CARE

...when there are not enough resources to give all patients the level of care they would receive under normal circumstances.



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Care exists in a continuum!

Conventional Care

Contingency Care

Crisis Care

How Are Crisis Standards of Care Different?

Focus of ***Normal*** Care
“Personal Rights”

Individual Patient

Community

Focus of ***Crisis*** Care
“Population Safety”

When there isn't enough to save everyone... how should we decide who gets what?

Some options--

1. First-come, first-served?
2. Lottery?
3. Save the most lives possible by giving more care to people who need it the most?
4. Favor certain groups?
 - The old OR the young?
 - Healthcare workers and other emergency responders?
 - Workers who keep society running (utility workers, transportation workers, etc.)?

Building a framework for response

- Decisions need to be
 - Rational
 - Consistent and objective
 - Backed by ethical principles
 - Something you can live with after the fact
 - Based on collaborative planning
 - Supported by coordinated effort

7 Substantive and Ethical Principles

1. Fairness
2. Duty to Care
3. Duty to Steward Scarce Resources
4. Transparency
5. Consistency
6. Proportionality
7. Accountability

Fairness

- “impartial and just treatment or behavior without favoritism or discrimination” - Oxford Dictionary
 - Fair access and treatment to the public
 - Disproportionate burden falls on health care workers in disaster
 - Expanding duties
 - Workplace risks
 - Stress and isolation

Duty to Care

- “A moral or legal obligation to ensure the safety or well-being of others” - Oxford Dictionary
 - Burden on all health care workers
 - Patients, public health, family members, self
 - Which takes priority during a disaster?
 - Emotional and physical stress

Duty to Steward Scarce Resources

- “Supervise arrangements or keep order; manage or look after”- Oxford Dictionary
 - Allocate scarce material and human resources
 - Vaccines, ventilators, beds
 - Health care workers, law enforcement
 - Maximum benefit to the population
 - Avoid/reduce collateral damage related to allocation
 - Long term repercussions of decisions
 - Good decision making is inherent

Transparency

- “the quality or state of being transparent”- Oxford Dictionary
 - Open and honest communication
 - Access to plans, changes, mistakes....
 - Sharing public health information

Consistency

- “The achievement of a level of performance that does not vary greatly in quality over time”- Oxford Dictionary
 - Solidarity of the “system”
 - Open collaboration aimed at a common purpose
 - Coordination of resources

Proportionality

- “Having a size, number, or amount that is directly related to or appropriate for something; having parts that are the correct or appropriate size in relation to each other” - Merriam-Webster Dictionary
 - How much goes to the location? (material or human)
 - Protect the public’s health
 - Restrictions to liberty, coercive measures

Accountability

- “The quality or state of being accountable; *especially* : an obligation or willingness to accept responsibility or to account for one's actions”- Merriam-Webster Dictionary
 - Taking responsibility for the wellbeing of the population and being answerable for the plans, coordination, and results
 - Should occur at all levels of response

Legal Issues

- PREP Act*- Public Readiness and Emergency Preparedness Act
 - Some protection from negligence claims when following CSC during a declared emergency
- No legal protection for gross negligence or for willful wrongdoing when providing care
- Practicing outside of scope?
- Public Health powers, licensure, informed consent.....
- When HCWs perceive a significant threat of liability, they are not as willing to respond to a crisis!

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3. Antommara AH, Powell T, et al., Ethical Issues in Pediatric Emergency Mass Critical Care, Pediatric Critical Care Medicine 12, Supp. 6 (2011): 163-168
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5. Hoffman S, Responders' Responsibility: Liability and Immunity in Public Health Emergencies, Georgetown Law Journal 96, (2008): 1913.
6. PREP: Public Readiness and Emergency Preparedness Act, 42 U.S.C. § 247d-6d.
7. Oxford Dictionary On-line, <http://www.oxforddictionaries.com/us/>
8. Merriam-Webster Dictionary On-line, <http://www.merriam-webster.com/>