SURGE CAPACITY: A COMMON SENSE APPROACH

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What is it?

Where should it be?

Who should know about it?
What is Internal Surge?
- Remember the S’s and the T’s?

But....

Internal surge is ALWAYS preferred
Why???
Only 8 disasters in U.S. history have resulted in > 1000 fatalities

Only 10-15 incidents per year result in more than 40 injured victims
WHAT IS MORE LIKELY?

- Moderate sized disaster
- Plan for 50-150 victims
- Tie planning to Hazard Vulnerability Analysis
- What would be your threshold for chaos?
Now we look outside
  - Only in a pandemic
  - Not for trauma

So......let’s think about at the Alternate Care Facility planning that you have already done
  - Would you chose the same sites if you were only planning for pandemic?
## Alternative Care Site Selection Matrix

### Infrastructure

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<thead>
<tr>
<th>Requirement</th>
<th>Aircraft Hangers</th>
<th>Churches</th>
<th>Community/Recreation Centers</th>
<th>Convalescent Care Facilities</th>
<th>Fairgrounds</th>
<th>Government Buildings</th>
<th>Hotels/Motels</th>
<th>Meeting Halls</th>
<th>Military Facilities</th>
<th>National Guard Armories</th>
<th>Same Day Surgical Facilities</th>
<th>Centers/Clinics</th>
<th>Schools</th>
<th>Sports Facilities/Stadiums</th>
<th>Trailers/Tents (Military/Other)</th>
<th>USAF</th>
<th>Other</th>
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WHAT LEVEL OF CARE WILL YOU PROVIDE?

- National Recommendations
  - Shelter
  - Nutrition/hydration
  - Sanitation
  - Meds for pre-existing conditions

- Does this make your planning easier?
- Will this free up hospital beds?
- Still in need of Triage?
SO WHAT ARE WE REALLY PROVIDING?

- Minimal Care Facility

- This is the common sense approach to Alternate Care Facility Care planning
  - Need minimal healthcare staff
  - Much can be provided by lay people
Reminder: This is an infectious disease facility, NOT trauma

- What are you going to call it that describes it’s purpose?
  - Examples
- People need to know what services will be provided
- Why is it important that the media knows what you call it?
OPERATING THE FACILITY

- Take a deep breath, remember this will unfold over a long period of time

- Treatment = Minimal
- Triage
  - Where
- Transport (will cover later)
- Staff
- Stuff
SCREENING/EDUCATION/TRIAGE

- **Who will do it?**
  - Healthcare provider
  - Just in time training for non healthcare folks

- **How will it be done?**
  - Video/handouts on care that will be provided
  - Are they better off at home or do they need hospitalization
  - Caring for the ill at home information
CASE STUDY

Mabel is an 82 year old woman who lives in an apartment down the street from her daughter. Two days ago she developed fever, cough and muscle aches. She had been watching the news and learned that local public health was encouraging folks that get sick to present to designated care facilities in their neighborhoods. Hers was in the local community center. Although she wanted to stay home, her daughter insisted that she take her to the facility. She was lucid upon questioning. She is drinking fluids but not eating much. Should she stay or be sent elsewhere?
**CASE STUDY**

Ed Smith is 92 years old widower who lives alone. His immediate family lives on the East Coast. Yesterday he developed a fever, cough and muscle aches. Although he went straight to bed heard on the news that he should go to the local high school that had been transformed into a care facility. He asked his neighbor to take him and he brought all his heart medications. When he arrived at the screening station he seemed a little confused and very lethargic. Should he stay or go elsewhere?
Hakim is a foreign student at UNL. When the pandemic started he tried to return to Sudan but the outbreak in his village was so bad his family asked that he stay put. He lives in the dorm year round and works at the local Starbucks. Two days ago he developed fever, cough and severe muscle aches. While lying in bed his boss called and told him about the care center that was at the gymnasium at UNL. He walked over there and into the screening room. The screener noticed that we was short of breath when he answered the question but his O2 Sats were 95%? Should Hakim stay or be sent elsewhere?
TRANSPORTATION

- Home
  - Family
  - Whomever else brought them
  - Self
  - Alternate transport (bus, van, etc...)

- Hospital
  - Ambulance
  - Other
WHO’S JOB IS IT TO PLAN FOR AND SET UP AN ALTERNATE CARE FACILITY

- Group Discussion

- Parameters for how quickly it will be set up
NEXT STEPS

- What main point did we get across?
- What questions do you have for your planners?
  - What about other partners
    - EMS
    - Law Enforcement
- Any other training needs?
  - Care of the Ill at Home
  - Triage
  - Consensus building