

Medical Health Operational Area Coordination (MHOAC)

4/1/20

DISASTER MEDICAL RESPONSE PLAN

The Disaster Medical Response Plan – DMRP is activated when local or Operational Area disaster medical resources are or may be overwhelmed. Its scope is applicable to all types of disaster or situations such as COVID-19.

The medical/health system in Orange County is multi-faceted & complex. It is composed of many public and private assets – any combination of which could be used to respond to a significant event. The plan outlines the system stakeholders, their roles and expectations of their ability to surge their treatment capacity.

These roles and expectations are reinforced through routine County facilitated meetings, hospital designation criteria and most recently through the Health Care Coalition of Orange County.

OVERVIEW OF CURRENT SITUATION (As of 4/1/20 0751)

Cases / Deaths
Worldwide: 885,687 / 44,216
Nationwide: 190,089 / 4,102
California: 8,584 / 183

Source: Johns Hopkins University & Medicine (<https://coronavirus.jhu.edu/map.html>)

Orange County (as of 03/31/20 1200): 502 Cases / 7 deaths

Hospital Bed Availability – Bed Capacity: 4,879			
<u>Date</u>	Occupancy %	COVID+ Hospitalized	COVID+ in ICU (subset of hospitalized)
3/26	67%		
3/27	67%	50	31
3/28	57%		
3/29	60%		
3/30	63%	94	46
All Hospital Surge Plans Activated – Increased bed capacity 21% (+1,024 beds) = Total Available: 5,903			
3/31	53%	67	31
4/1	54%		

These numbers fluctuate hourly due to changes in patient conditions. Data is gathered daily at one point in time. It's too early to gauge this information for worthiness – it will be more helpful in trending when we actually hit surge, peak & decrease surge.

SURGE

Every day, hospitals enter in their bed census & available/staffed beds via ReddiNet (this is NOT new, hospitals have been doing this daily for a few years but not necessarily putting in accurate data) via the HAvBED system. We wanted to make sure that hospitals didn't get out practice reporting – Now it is imperative that receive accurate information. This assists us in tracking general occupancy countywide as well as ascertain certain emergency type of information for decision making.

You'll notice in the table that EMS was using 4,879 beds as baseline # of total hospital beds. It did not include non-acute/long term care, psychiatric and NICU beds. Based on that & until 3/30/20, OC hospital bed occupancy (based on the 4,879 baseline) had been ~60%.

In normal surge & at minimum, hospitals can flex 5%. However many regulations have been waived to support COVID-19 prep & response. Using a recent Healthcare Coalition survey 1/2/20 and validation from the hospital CEOs, beds available have physically expanded 21% due to activation of all hospital surge plans. This released beds for surge response using closed/inactive floor beds, pre-induction/post-anesthesia/procedural Beds, & OR beds. **This hospital bed surge brings the available bed capacity to 5,903.**

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- Received this am & shared w/ PH & all hospitals: COVID-19 Scenario Forecasts utilizing the Cornell Model from Kaiser (Attached)

LOCAL & REGIONAL MUTUAL AID

There is OVERWHELMING shortage of resources nationwide. As quickly as we receive state shipments, we are distributing the items. Since February 18th, the Health Care Agency Operations Center has processed 1,069 requests (mostly PPE) from 257 OC healthcare providers. We have filled & distributed 1.1 million units of PPE. However, that is only 26% of what we have requested on behalf of the system.

Our local stockpile is nearly depleted & in order to ensure that acute care hospital resource requests are met, the County will be setting up cost-sharing contracts with hospitals to procure items (such as PPE, ventilators).

State reported the delivery of 3rd SNS:

- 120,900 N95
- 287,022 face masks
- 62,413 face shields
- 51,375 surgical masks
- 3,528 Coverall

For background, there are 6 medical mutual aid regions in California. Orange County is in Region I along with Los Angeles, San Luis Obispo, Santa Barbara & Ventura. For mutual aid purposes, Orange coordinates w/ Region I partners & once all resources are exhausted we can reach into other regions. For this event, all Regions are literally competing for the same scarce resources. However, we do have approval to use the USNS Mercy to offload non-COVID-19 patients.

ALTERNATE CARE SITE

As the Orange County Medical Health Operational Area Coordinator (MHOAC), advanced planning and assessments of potential sites to quickly & readily accommodate overwhelming hospital patient surge were conducted – physically &/or virtually. Multiple sites were considered & the relevant operators contacted. Those included, Saddleback-San Clemente, Shuttered Anaheim General, Tustin Rehab, Fairview Developmental Center & the OC Fairgrounds. Other facility suggestions are more than welcome if anyone has knowledge of them.

Regarding San Clemente, it was apparent in our discussions with Memorial Care that the property is derelict and missing vital functions to be able to quickly mobilize to support COVID-19 response efforts. Anaheim General is under construction & not useable and Tustin Rehab is partially occupied through the end of the year. This leaves Fairview & OC Fairgrounds as the best options.

On 3/30/20, EMS had a call with the Michelle Baass (undersecretary to Dr. Ghaly at DHHS) & her team including Dr. Alice Chen. They are the state leads for setting up an alternate care site at Fairview. Here's a summary of the conversation:

- The State is committed to partnering with the County and working together quickly to establish Fairview Developmental Center as an alternate care site as early as next week.
- Specifically, the expectation is that the State will support/reimburse efforts to refurbish, remodel and resource.
- The healthcare system in the County will need to provide a staffing and operations plan.
- Initial planning for this site will be for low acuity patients who do not require advanced hospital care, are able to perform some activities of daily living and moderate nursing intervention or care. There is flexibility in this patient criteria but the State made it clear that this is not going to be an acute care hospital.
- Bed capacity will be determined based on the ability to secure staffing resources from our local health system.

All of this information was shared with Hospital CEOs, HASC, EOC Policy, Health/Medical Branch & HCA Leadership.

- Touring Fairview at 1600 today with hospital operators

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CURRENT HOSPITAL CAPACITY

Licensed Beds	
Total # of Hospital Beds:	4879
Total # of ICU Beds:	673
Total # of Med/Surgical beds:	3430
Total # of all other beds:	776
Total Ventilators	809

Total # of hospital beds 4,879 (base # for planning & does not include non-acute/LTC beds, psych, NICU, etc.).

HOSPITAL SURGE

In normal surge & at minimum, hospitals can flex 5%. However regulations waived in current COVID-19 prep & response. Using Healthcare Coalition survey 1/2/20, hospitals can physically expand 21% of beds for surge response using closed/inactive floor beds, pre-induction/post-anesthesia/procedural Beds, & OR beds. This hospital bed surge brings the licensed available beds to 5,903.

SURGE BEDS OVER LICENSED		
Total # of Hospital Beds:		4,879
5%	+244	5,123
10%:	+488	5,367
21%	+1024	5,903
25%:	+1219	6,098

EXTRA SURGE STRATEGIES IMPLEMENTED/PLANNED

OPTION 1

OPTION 2

OPTION 3

SURGE BEDS OVER LICENSED			SURGE BEDS OVER LICENSED			SURGE BEDS OVER LICENSED		
Total # of Hospital Beds:	5,903		Total # of Hospital Beds:	5,903		Total # of Hospital Beds:	5,903	
Existing Surge Tents	+50	5,953	Existing Surge Tents	+50	5,953	Existing Surge Tents	+50	5,953
Ordered Surge Tents	+200	6,153	Ordered Surge Tents	+200	6,153	Ordered Surge Tents	+200	6,153
USNS MERCY	+200	6,353	USNS MERCY	+200	6,353	USNS MERCY	+200	6,353
FAIRVIEW	+900	7,253	FAIRVIEW	+450	7,253	FAIRVIEW	0	7,253
FAIRGROUNDS	+350	7,603	FAIRGROUNDS	0		FAIRGROUNDS	0	

1024 + 50 + 200 + 200 + 900 + 350 = 2,724
2,724/4,879 = 56% increase

1024 + 50 + 200 + 200 + 450 = 1,924
1,927 / 4,879 = 39% increase

1024 + 50 + 200 + 200 = 1,474
1,474/ 4,879 = 30% increase