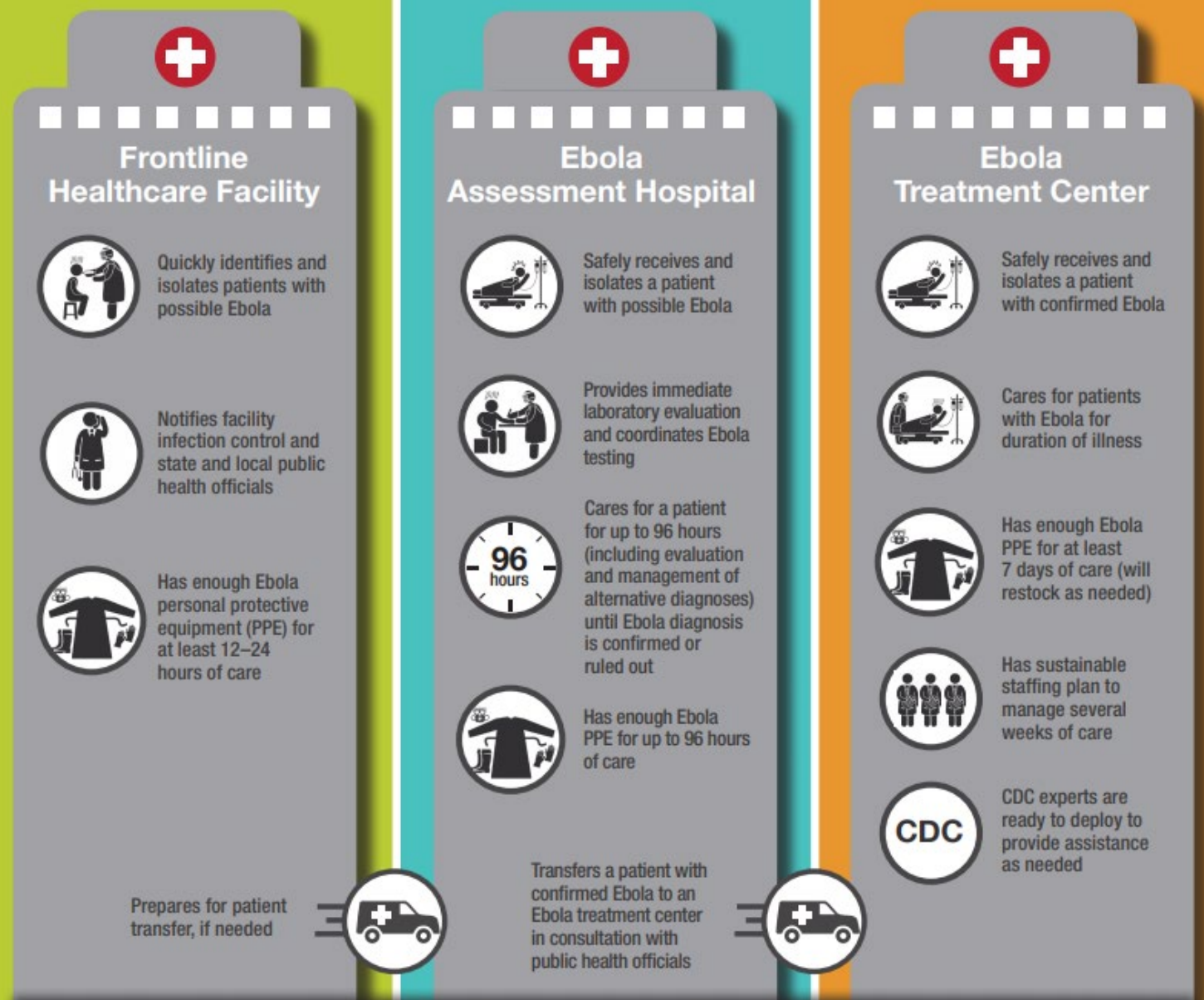




# LOS ANGELES COUNTY EID RESPONSE

# THREE-TIERED FRAMEWORK



# EID RESOURCES IN LOS ANGELES COUNTY

## Regional Ebola Treatment Center (RETC)

- Cedars-Sinai Medical Center
- Federal Region IX: California, Arizona, Nevada, Hawaii, Guam, Mariana Islands, Samoa, Palau, Micronesia, Marshall Islands

## Ebola Treatment Center (ETC)

- Kaiser Permanente Los Angeles Medical Center
- Ronald Reagan UCLA Medical Center

## Ebola Assessment Hospital (EAH)

- Children's Hospital Los Angeles



# EID RESOURCES IN LOS ANGELES COUNTY

## High Risk Ambulance (HRA) Providers

- AMR
- McCormick
- CARE





FRONTLINE FACILITY MUST BE ABLE TO:

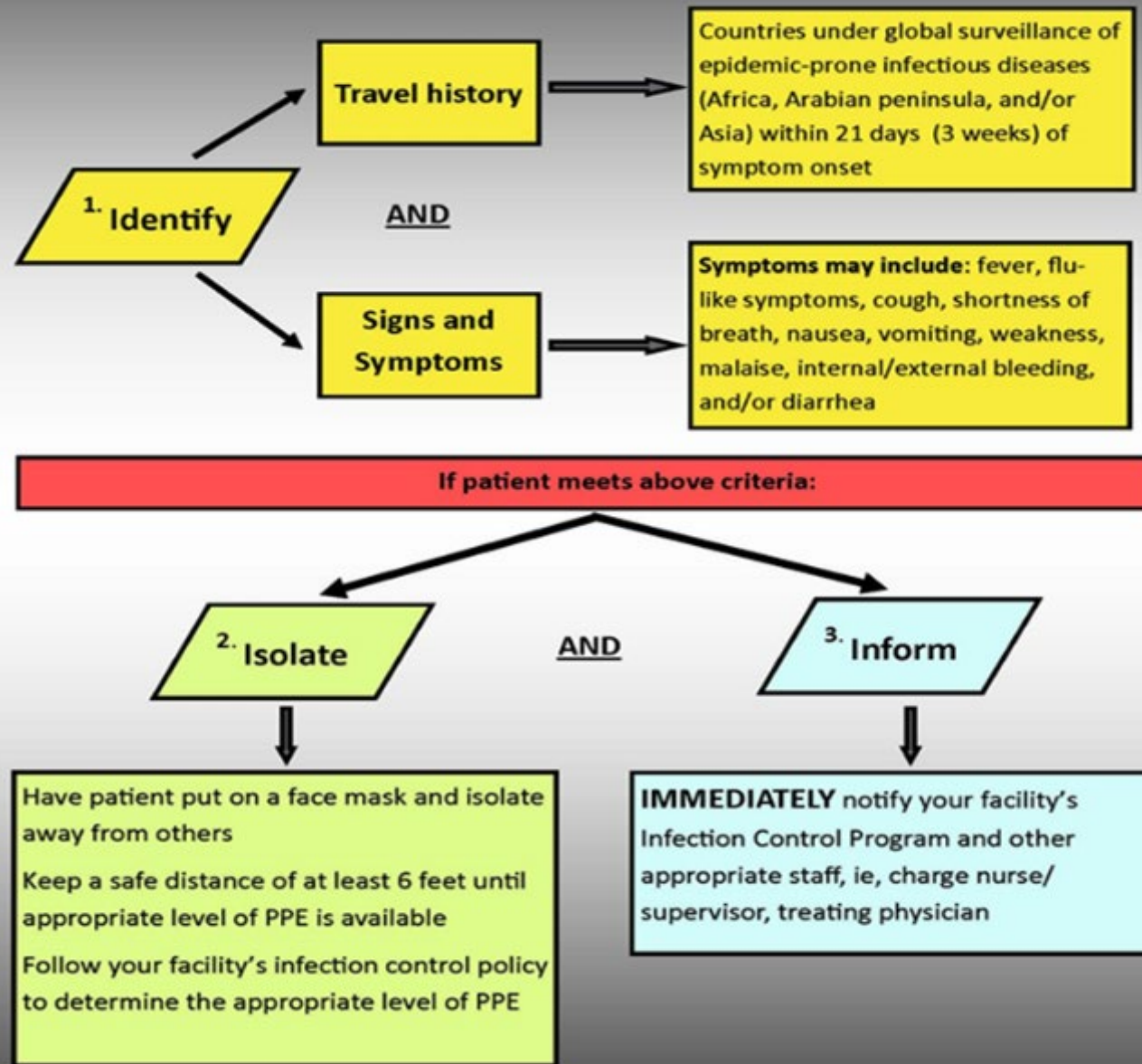
*Identify, Isolate, & Inform*

*Provide care for at least 12 hours*



# Identify, Isolate, & Inform

## Frontline Facility Care and Management of Patients with an Emerging Infectious Disease



# EMTALA OBLIGATIONS

Frontline hospitals must provide:

- A medical screening examination (MSE)
- Stabilizing treatment within the hospital's capability and capacity
  - Includes: Managing critically ill patients that require intubation or other high-level care



# DEPARTMENT OF PUBLIC HEALTH ACUTE COMMUNICABLE DISEASE CONTROL (ACDC)



**Mission: To reduce the incidence of communicable diseases through prevention, surveillance, and outbreak control**

**The ONLY entity that:**

**Can activate an EID Response**

**Determines if an Ebola Treatment Center and a High-Risk Ambulance is needed**



# ACDC'S ROLE IN AN EID RESPONSE

## Frontline Facility

- Conducts an epidemiologic interview
- Contact tracing
- Healthcare worker monitoring
- Actions and recommendations determined on a case-by-case basis

## Activation and Coordination

- Notifies the State and CDC
- Conducts a series of conference calls
- Coordinates patient destination
- Provides situational awareness among stakeholders



# INCIDENT MANAGEMENT PLANNING CONSIDERATIONS

# HOSPITAL COMMAND CENTER (HCC)

- Follows Hospital Incident Command System (HICS) structure
- Customize HICS depending on the needs of the incident
- Always use the Three C's
  - Communication
  - Coordination
  - Collaboration
- What are your triggers to activate incident command?





# SURGE INCIDENT STRATEGIES

- Consider how many patients can be handled at once for screening or inpatient treatment – 2. 5. 10 patients
- Identify surge spaces
  - Closed but functional patient unit, designated inpatient unit, cohorting
  - Pop up space “medical tents”
  - Managing triage/waiting areas: segregation of potentially infectious patients from others



# COORDINATION AND COLLABORATION

- **Emergency management**
- **Administration**
- **House supervisor**
- **Nurse leaders**
- **Med/Tech Specialist (Infection Prevention)**
- **Occupational health**
- **Labor unions**
- **Mental/Behavioral Health**
- **Patient access**
- **Environmental services**
- **Facilities management**
- **Materials management/Supply Chain**
- **Security**

# COORDINATION AND COLLABORATION OUTSIDE PARTNERS

- Los Angeles County Department of Public Health
  - *Depending on jurisdiction: Pasadena Public Health & Long Beach Public Health*
- California State Department of Public Health
- CDC



# COMMUNICATION AND COORDINATION

- Internal
- External



## Public Information Officer (PIO)

*Conduit for information to internal and external stakeholders, including media as approved by Incident Command.*

- Risk Communication Strategies
- Determine internal and external messages
- Collaborate with medical staff and family on messaging
- Establish information lines/hotlines
- Monitor and manage social media



# COORDINATION AND PREPARATION

- Plan for the ***What If...***
- And... then the ***What If*** that changes too

