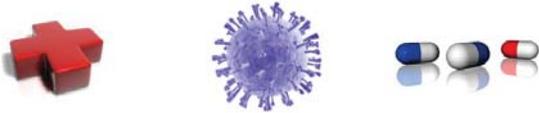


Arizona Department of Health Services

Andrew Lawless, Training Officer
Bureau of Public Health Emergency Preparedness

Arizona Crisis Standards of Care (CSC) Public Engagement Workgroup



1

Public Engagement Workgroup Charter Goals

- Coordinate w/ regional healthcare coalitions
- Explore and identify public engagement and outreach methods
- Identify materials, including handouts, media releases, public notices, presentations, online content, surveys, etc.) for public engagement campaign
- Develop a project plan and schedule for campaign
- Ensure proposed practices are equitable across jurisdictions
- Conduct public engagement campaign, develop a summary report for public engagement sessions

2

Workgroup Output

Public session format, Workgroup decided to:

- Conduct at least one session in each healthcare region
- Utilize an audience response system to collect data in real time
- Use social media and regular communication channels (newspaper ads) to invite public and stakeholders, media coverage in local paper
- Decided that campaign would have public involvement focus and not be considered research
- Develop a summary report to present findings

3

Workgroup Output

Program materials, Workgroup decided to:

- Use IOM Report "Program Materials" as a starting point (IOM report p. 6-45)
- Shorten materials from the sample 5-hour agenda
- Create a 2-hour session that could be shortened further if necessary
- Use the sample demographic and pre-survey questions
- Shorten and adapt the presentation, discussion scenarios and questions

4

CSC Public Engagement Sessions

- November 2013 – January 2014
- 9 sessions: Phoenix (3), Sedona, Sun City, Tempe, Tucson (2), and Yuma
- 2-hour public engagement sessions facilitated by ADHS staff and attended by local citizens, community health stakeholders, and university students
- Approximately 150 data sets collected
- Each data set contains 45 multiple response and three written answer questions

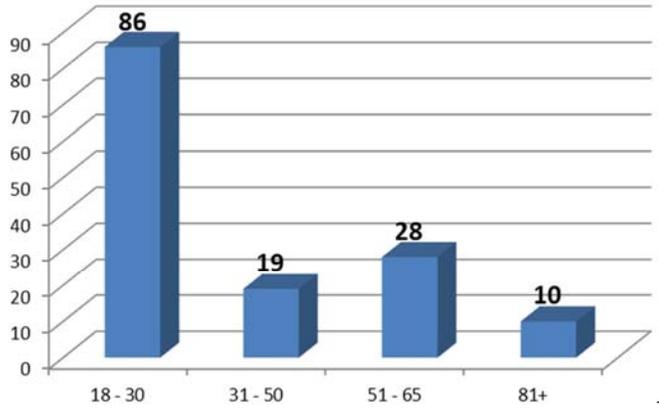
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CSC Public Engagement Data

- Initial assessment around 150 respondents (n = 150)
- Final assessment will include online data and additional write-in surveys
- Around 66% of respondents were female
- Around 33% indicated they worked in healthcare
- Around 25% stated they worked in public safety or emergency response

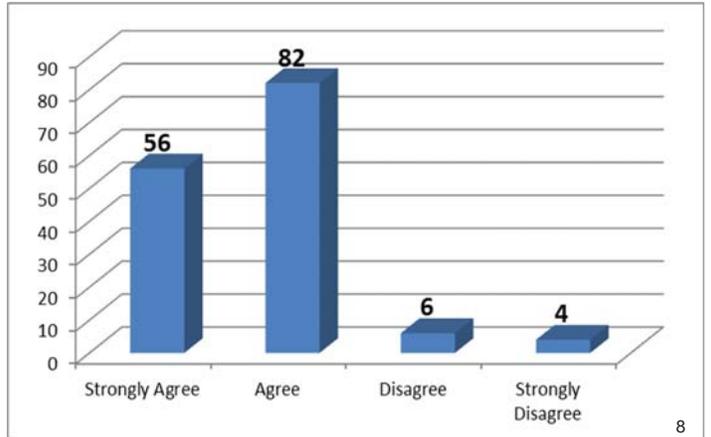
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Age of Respondents



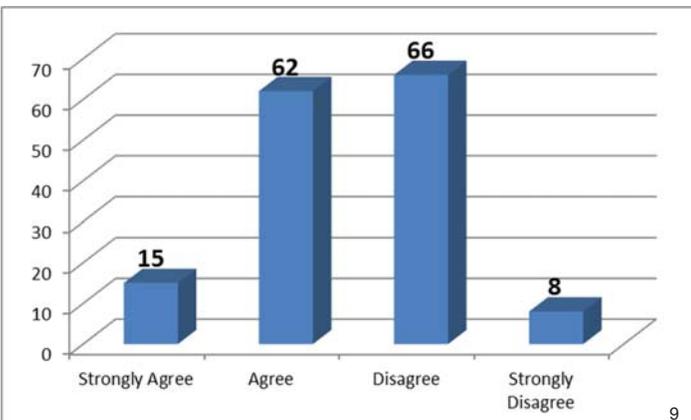
7

It is better to save the most lives—even if it means that some people won't get all of the medical care they would get under normal conditions.



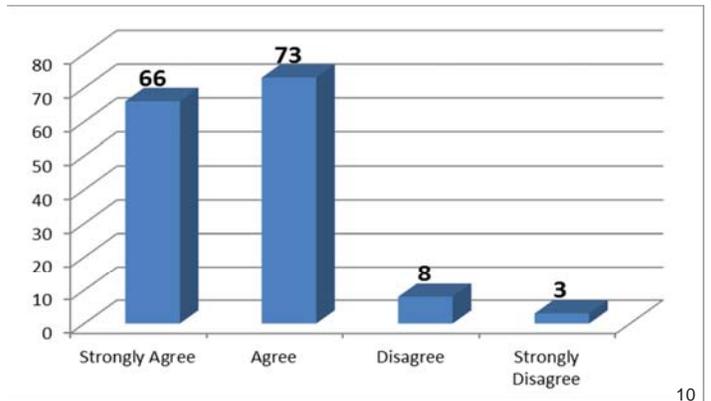
8

More medical care should go to save younger patients because they have the most years to live.



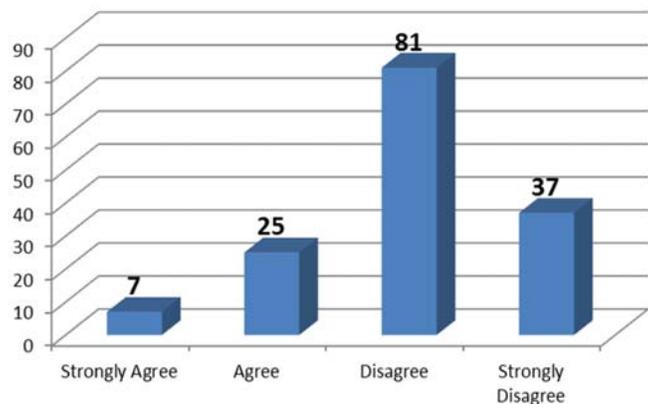
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Health care providers should be allowed to perform services different from their usual duties if that might save more patients.



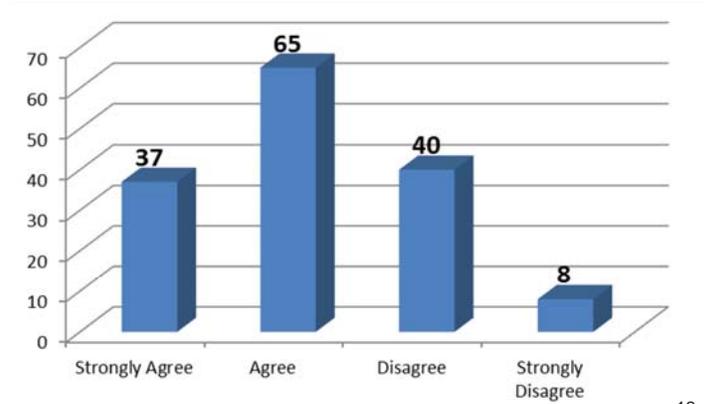
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The sick and injured should be treated first-come, first-served—whether or not they are likely to survive.



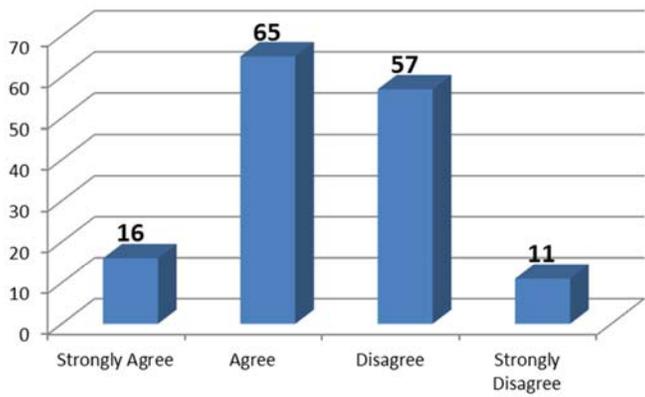
11

Firefighters, police, and other first responders should be at the front of the line for medical care because they are important for public safety.



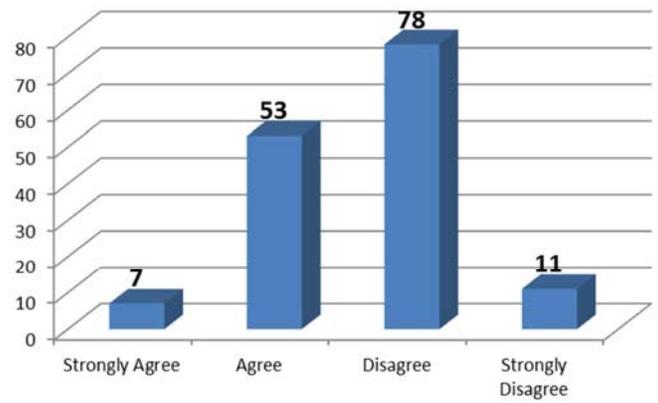
12

Family members of health care workers should be at the front of the line for vaccines and treatment if they face an increased risk of illness.



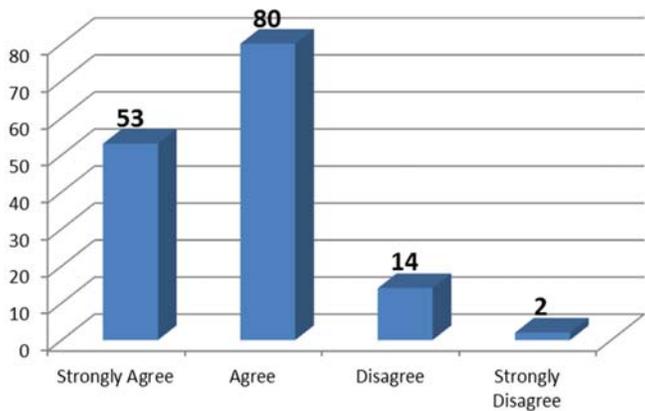
13

People should not get limited medical resources if they will survive, but end up severely disabled.



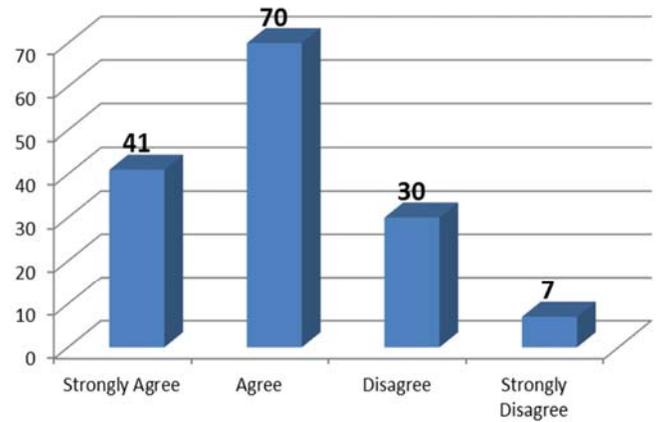
14

Health care providers should be at the front of the line for care if they will be able to help save others when they recover.



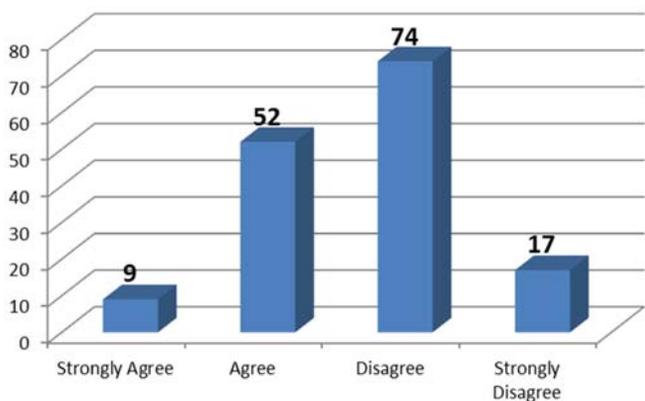
15

Most medical care should go to patients who probably will die unless they receive treatment.



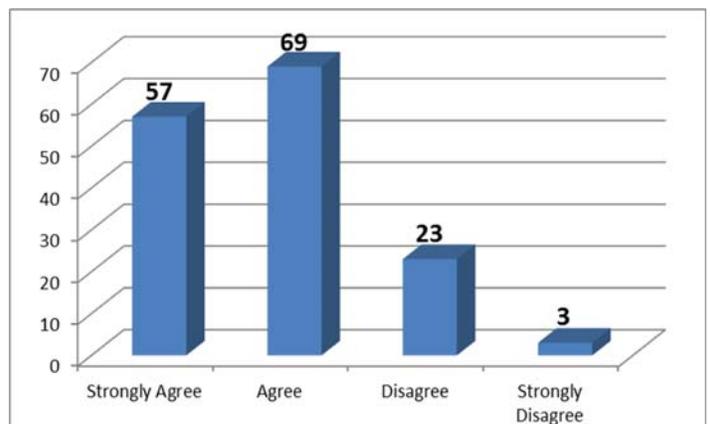
16

Elderly patients should get less medical care so that more children and young adults can be saved.



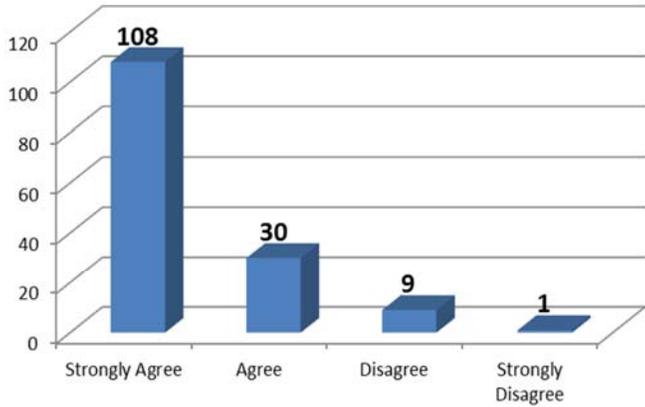
17

Health care providers should be at the front of the line for treatment if they are risking their health and safety to care for others.



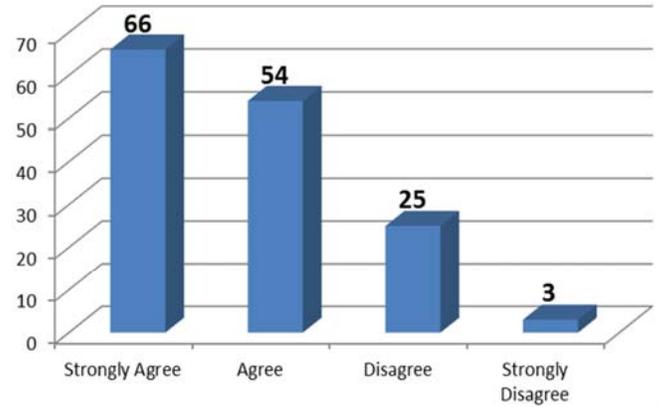
18

A person's ability to pay should not matter when deciding who should receive limited medical resources in a crisis.



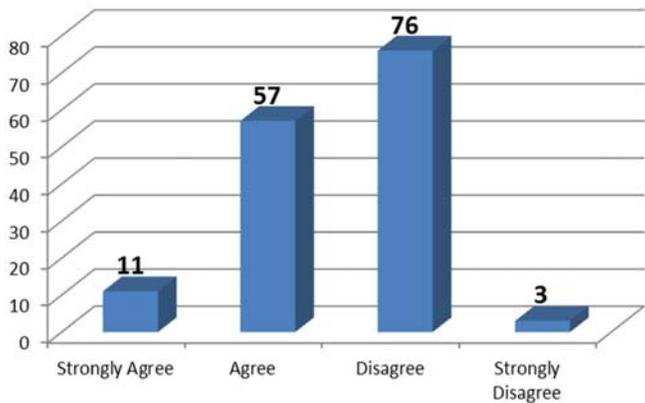
19

Every hospital in the disaster area should follow the same rules when deciding how to use limited medical resources.



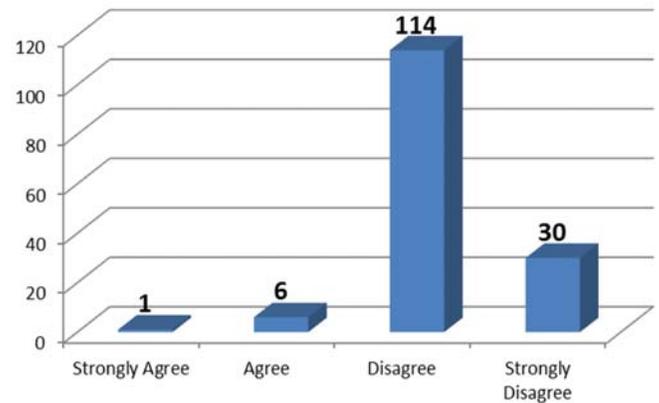
20

People who do jobs that keep society running (transportation workers, utility workers, etc.) should be at the front of the line for treatment.



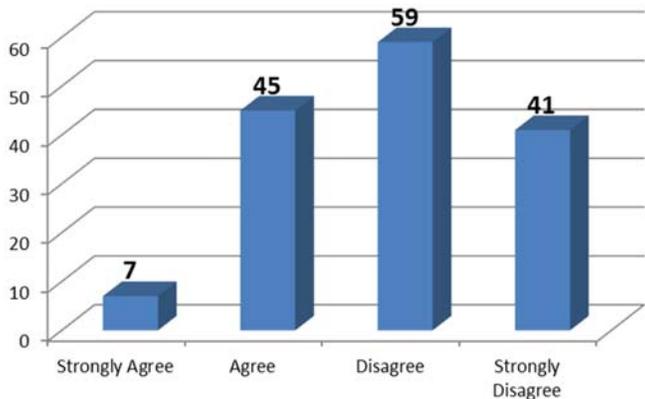
21

Elderly patients should get more medical care than younger people because they have important wisdom and experience.



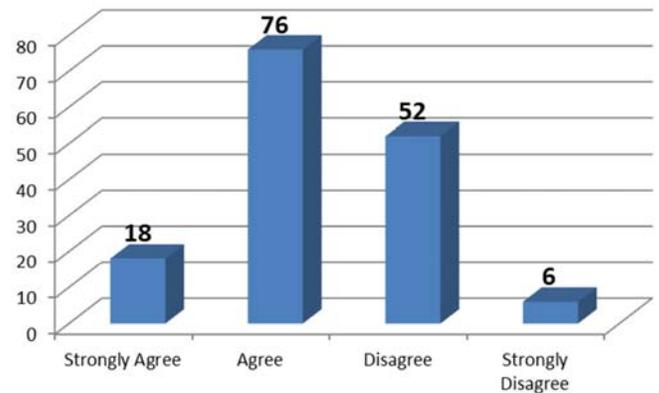
22

Doctors and nurses should be free to make their own decisions about which patients will get treatment and which ones will not.



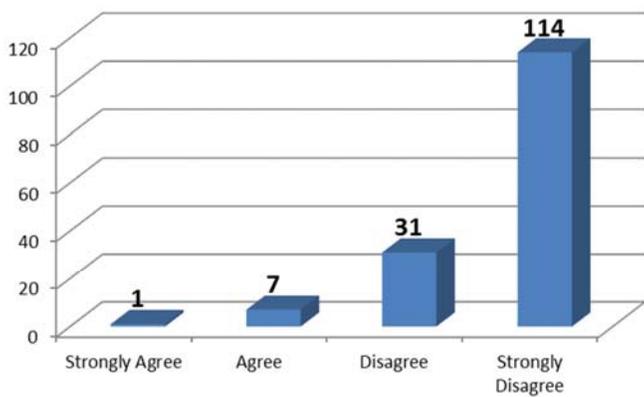
23

More medical care should go to save young and middle-aged adults because they care for children and elders and make up society's workforce.



24

The best way to decide who should be treated is to do a lottery or draw straws.



25

Earthquake Scenario Questions

The following bullet points were presented onscreen, distributed in printed form, and read out loud before participants were asked the scenario questions:

- A violent earthquake occurred in your community 12 hours ago.
- Transportation, water, power, and communications systems are disrupted.
- The number of injured and dead is rapidly rising.
- Your community's only hospital is treating earthquake victims as well as patients with other serious health problems.
- Critical supplies are running out.
- Healthcare and emergency workers are stretched to their limit.



Health and Wellness for all Arizonans



Earthquake Scenario Questions

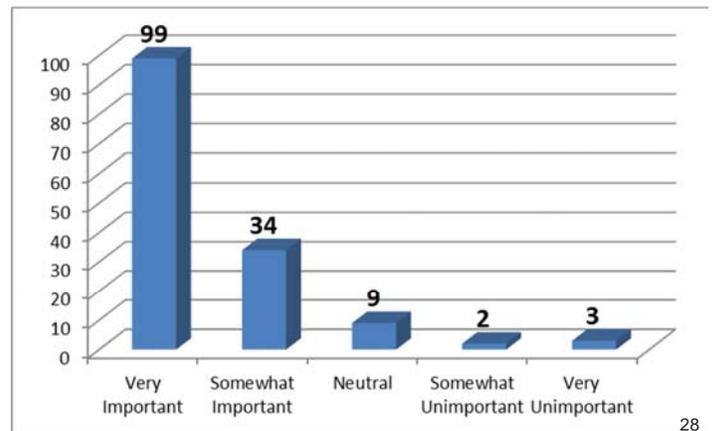
- Patients are being placed in hallways and cafeterias as space runs out.
- Your community is cut off from federal and state help for the time being.
- The hospital has nine critically injured/sick patients, but there is only enough supplies and staff on hand to treat five of them.
- The four patients who do not receive immediate treatment will die before more help arrives; although they will receive comfort care to minimize suffering.



Health and Wellness for all Arizonans

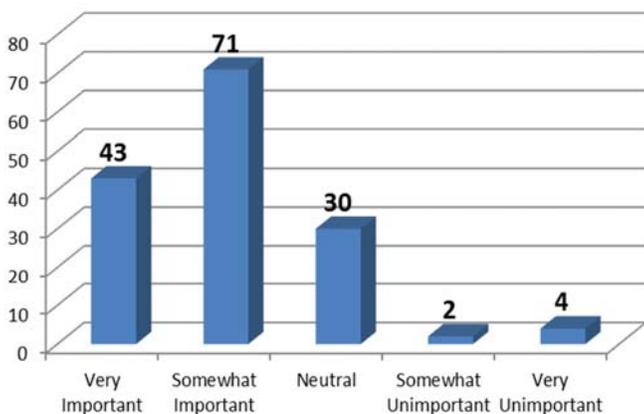


How important is chance or likelihood of survival in deciding who should receive treatment?



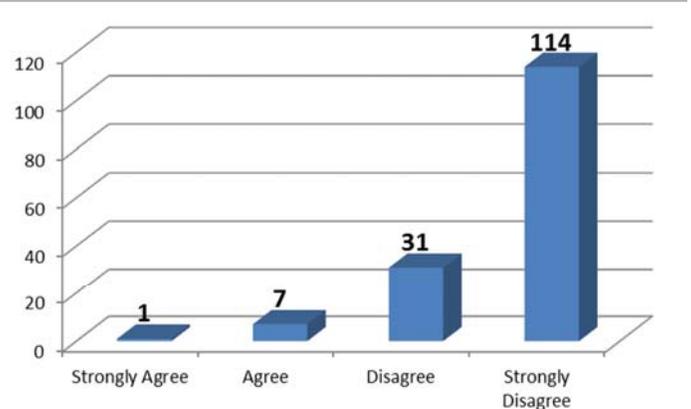
28

Would the patient's long-term quality of life affect your decision?



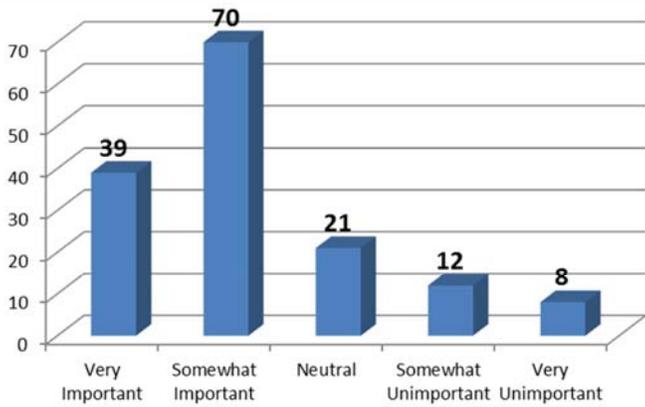
29

The best way to decide who should be treated is to do a lottery or draw straws.



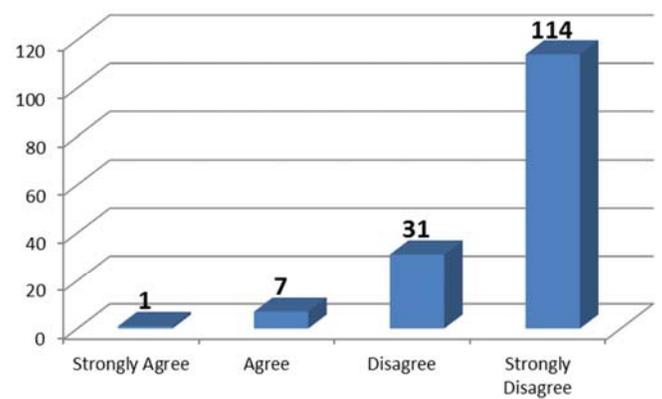
30

How important is age in deciding who should receive treatment?



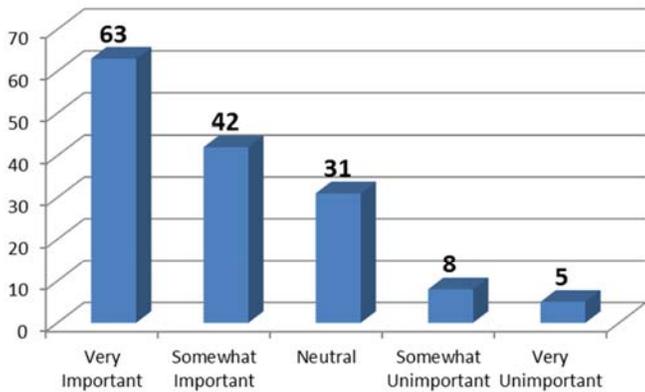
31

The best way to decide who should be treated is to do a lottery or draw straws.



32

When you can't save everyone, what matters most? Saving the most lives-by giving limited resources to people who need them the most?



General Conclusions

- Public doesn't really want age to be a factor in deciding who gets care
- Healthcare workers should get priority treatment
- Public doesn't fully understand or agree that critical infrastructure workers may need priority treatment
- Public does not want to use a first-come-first-serve, or lottery approach
- Ability to pay should not matter



Health and Wellness for all Arizonans



Questions



Health and Wellness for all Arizonans

