Oregon Hospital Capacity Crisis

December 7, 2022



Situational overview

- RSV pediatric hospitalization rate very high
 - Surpassed previously recorded peak
 - Slight decrease last week might represent peak, though may still see effects of increased Thanksgiving spread
- Influenza hospitalization rate rising rapidly
 - Anticipate rapid increases sustained over many weeks
 - Will disproportionately impact young children, elderly, pregnant, communities of color and tribal communities
- COVID-19 hospitalization rate is increasing
 - Revised Peter Graven forecast available
 - Likely due to BQ.1 subvariant predominance



Field updates

- Field updates extremely concerning
 - Nearly all major hospitals in Oregon report they are at or near capacity
 - OHSU and others reporting highest ER boarding ever
 - Most hospitals are experiencing staffing shortages, thus limiting ability to surge capacity
 - Record-high transportation needs (e.g., EMS, specialty pediatric life support teams), further delayed by ER boarding
 - Significant delays in hospital transfers for higher levels of care
 - Overall vacancy has been running at about 8%, with ICU vacancy running around 6-12%. Both have now dropped to 5% or less.
 - Bed capacity data does not necessary reflect real-time capacity or dynamic staffing challenges.

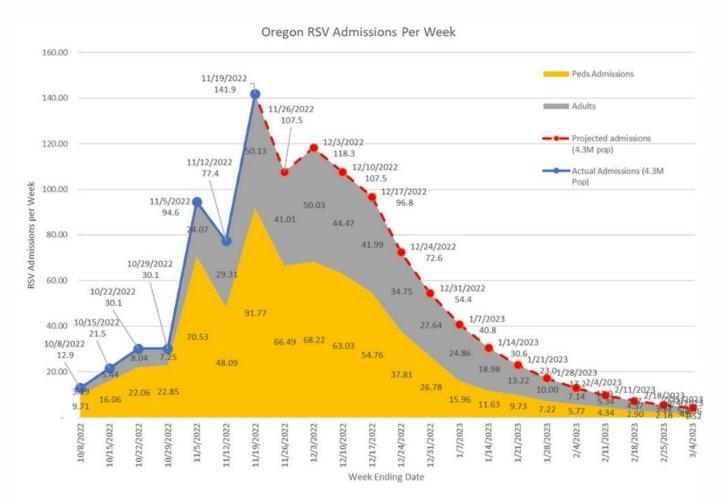


Field updates (continued)

- Field updates extremely concerning
 - OHSU Doernbecher, Legacy Randall Children's Hospital, and Providence St. Vincent Medical Center
 - Have implemented crisis standards of care;
 - Are doubling occupancy of typically single patient ICU rooms;
 - Have repeatedly been full, with no additional surge capacity
 - Clinicians report unusually high severity among previously healthy hospitalized children
 - Statewide:
 - Many hospitals are keeping higher acuity patients than normal
 - Using adult beds for pediatrics
 - Cancelling necessary, non-elective procedures.
 - Using non-clinical space: "hallway beds", cafeteria, beyond

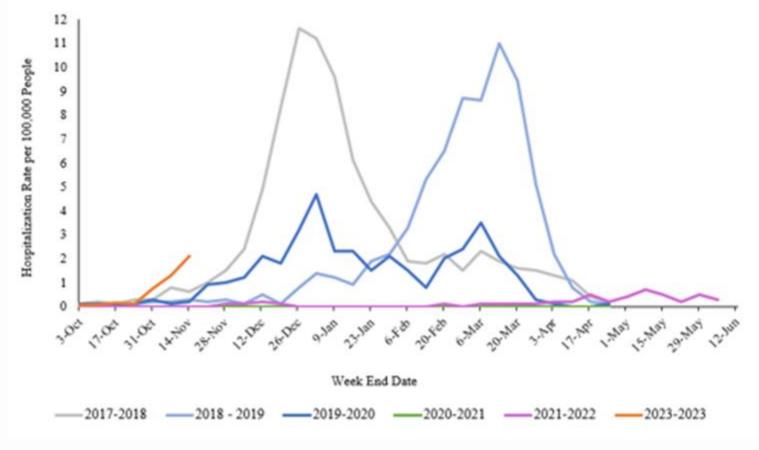


RSV hospitalizations, Oregon, projected



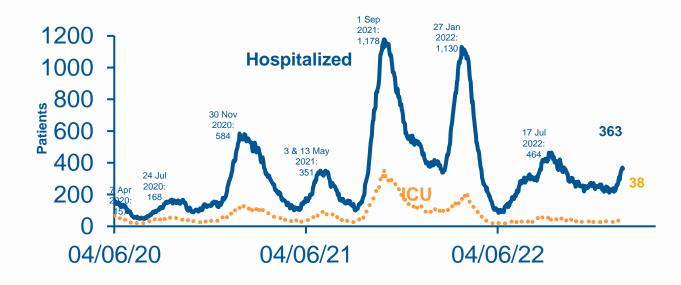


Influenza hospitalization rates, Oregon, by season





COVID-19 hospitalizations, Oregon, by severity



Date

*"COVID-positive patients." Source: HosCap; data as of 30 Nov 2022.



Actions Taken

- Capacity has been added to the hospital system through resources allocated at E-Board.
 - Additional pediatric-specific staffing supports:
 - OHSU
 - Legacy
 - Providence
 - ODHS decompression support
- Emergency declaration for respiratory disease for pediatrics
- Crisis standards of care implemented by multiple hospitals
- BH residential (kids and adults) crisis staffing supports
- Incident management structure implemented and Oregon Medical Management Center (OMCC) in place
- Facilitating mutual aid to address medication and equipment shortages



OHA Next Steps

- Working with the Governor to update the State Executive Order ASAP
- Funding additional contract staff for hospitals to implement further surge capacity in the coming weeks with ongoing RSV, increasing flu admits
- Facilitating surge capacity at facilities by streamlining regulatory requirements
- Advocating for enhanced federal support (resources/funding)
- Aligning and supporting messaging around voluntary masking and possible mask distribution (e.g., to CBOs)
- Exploring transportation (EMS) streamlining
- Continuing to strengthen communications with historically underserved populations



Executive Order and surge staffing next steps

EO:

- Update language to include adults
- Update language to include collective bargaining principles/priorities

Surge Staffing:

- Short term commitments, 4 to 10 weeks
- Hospitals must participate in a cost share of at least 25%
- OHA spending is estimated to be capped at \$25 million (GF)



Questions?

