

A Case-Based Approach Developed in COVID-19 for Training in Implementation of Crisis Standards of Care for Hospital Resource Allocation

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Abstract

Healthcare professionals receive training in ethical decision making, but the ability to morally implement and apply hospital policies around issues such as scarce resource allocation is a critical yet absent component of training. These cases were designed to train individuals on COVID-19 Crisis Standards of Care, especially ventilator allocation algorithms, in Colorado. The training was completed by 43 individuals who identified as members of Colorado hospital triage teams in the event of resource scarcity during the COVID-19 pandemic. A total of twelve unique participants completed the follow-up survey, eight within two months of training and four at a one-year follow-up for a total response rate of 28%. 42% of survey responders had previous experience with resource allocation. Average score for training usefulness was 4.5 (out of 5), and average confidence in implementation ability was 3.5 (out of 5). Overall themes for impact of the case-based training included: 1) facing reality, 2) solidification of knowledge, 3) logistical hurdles, 4) team building, and 5) moral distress. Areas for growth elucidated a desire for additional training and application to a real-life setting. There is a paucity of experience in addressing the ethics and issues of resource allocation in the healthcare field. Participants reflected that they found this training modality useful and felt it illuminated logistical and moral challenges in resource allocation. These materials, which can be utilized in future trainings with healthcare professional communities, provide hands-on logistical and ethical training regarding resource allocation.