Ethical Allocation in Healthcare During a Time of Catastrophe
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“Remember; when disaster strikes, the time to prepare has passed” - Steven Cyros
Beautiful British Columbia is waiting for the “big one”
There may be numerous challenges to receiving supplies
Hospitals will be treating more patients while caring for patients in their care using available resources.

Demand for medical supplies will far outweigh the available supplies.
Disaster situation factors

- UNPREDICTABILITY
- UNCERTAINTY
- UNFAMILIARITY
- SPEED
- URGENCY
- VULNERABILITY
Allocation of what is available will likely be necessary

• The conditions will challenge clinical and operational leaders to apportion resources
• Prudent to provide guidance and support on values to consider when making decisions during difficult and emotional times

Dealing with loss

Triaging

Coordinating the response

Looking for resources

Coping with trauma
# Criteria for Allocating Medical Products in Short Supply in British Columbia

<table>
<thead>
<tr>
<th>Priority</th>
<th>Specific criterion</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Patients for whom the product will assist with life-saving and limb-saving procedures receive access to product (i.e. urgent and emergent health care procedures)</td>
</tr>
<tr>
<td>2</td>
<td>Healthcare providers who, by carrying out their duties, are at high risk of harm have access to product (e.g. N95 mask in ICU or during pandemic at hospital treating exposed patients)</td>
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<tr>
<td>3</td>
<td>Patients who are experiencing severe physical pain (e.g. acute, chronic, etc.) and suffering (e.g. mental, emotional, etc.) and whose pain might be alleviated with treatments dependent on the product, receive access to product</td>
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<tr>
<td>4</td>
<td>In public health contexts, the product should be allocated to minimize the net harm to the public</td>
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</tbody>
</table>

### Criteria that should not be used
- Where patients live geographically
- The behavioral cause of a patient’s pain and suffering, including past history of, and/or current, substance use & addictions issues
- Which health authority paid for the product or the vendor the health authority contracts with
- Age, race, religion, linguistic background, ethnicity or socioeconomic status
Application

Impromptu implementation (shortage of IV diluents)

- Trust through transparency and communication
- Respect shown to patients, families and public
- Clear and timely communication
- Context is crucial to establish considerations
Thank you

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