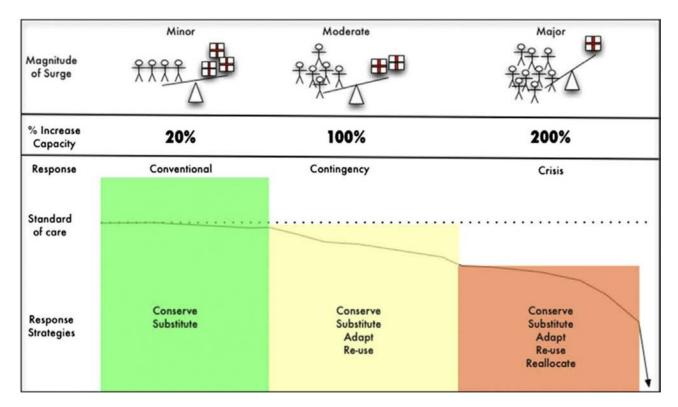
Ethics, Healthcare Equity, & COVID-19

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Conventional, Contingency, Crisis Capacity



CHEST 2014; 146 (4_Suppl): 8S - 34S

Ethical priorities in Crisis

Usual standards of care

- Respect for pt autonomy
- Maximize benefit to each of your patients
- Fidelity/allegiance to each patient
- Allocate limited resources responsibly & fairly (among your pts)

Not all who could benefit receive treatment (due to lack of access/insurance) Public Health Crisis/

Crisis Standards of Care

- Respect for common good, not individual autonomy
- Less autonomy for practitioners & pts
- Maximize benefit to the greatest number of people (utilitarian)
- Allocate scarce resources responsibly & fairly (population wide)

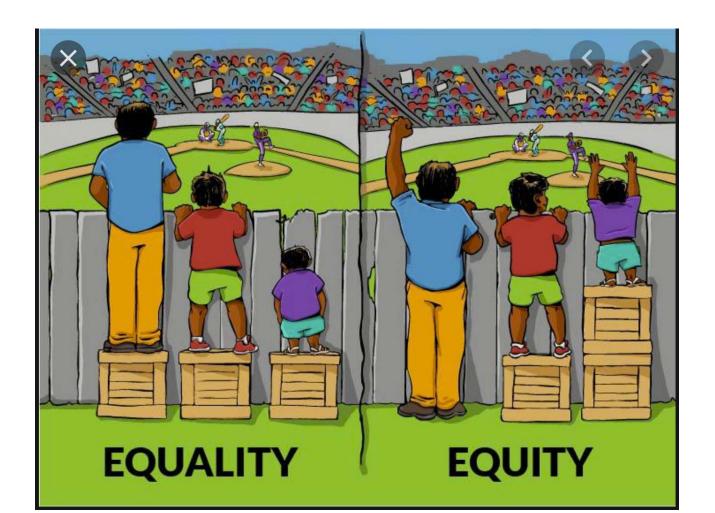
Not all who could benefit receive treatment (due to scarcity)

Health(care) Equity is a form of Justice



"providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status." (IOM)

"Equity is the absence of avoidable, unfair, or remediable differences among groups of people. ." (WHO)



Justice as Fairness Goal: fair allocation of healthcare resources

Privileged Satisfied with Equality

- Trust in hc system
- Utilitarian triage makes sense
- Biases often do not impact access/quality of care
- Blinded triage treats everyone as equals

Underserved Seek Equity

- Skepticism in/fear of hc system
- Priority/special consideration for disadvantaged groups
- Bias hurts quality of/access to care
- Blinded triage perpetuates health disparities/structural racism

P Politico

A new study shows just how badly black Americans have been hit by Covid-19

Counties across the country with a disproportionate number of African American residents accounted for 52 percent of diagnoses and 58 ...

6 days ago

Kaiser Family Foundation

Growing Data Underscore that Communities of Color are Being Harder Hit by COVID-19

In a recent analysis, we highlighted the higher risks COVID-19 poses for communities of color due to underlying health, social, and economic ...

3 weeks ago

Los Angeles Times

Racism, inequity fuel L.A. minority coronavirus death toll

... inequity fuel high minority death toll from coronavirus, L.A. officials ... of cases was initially reported in wealthier communities of Los Angeles, ...

1 day ago

Vox Vox

For immigrants without legal status, coronavirus relief is out of reach

But many of these workers who lack legal immigration status have done so without receiving any financial assistance from the federal government ... 1 week ago



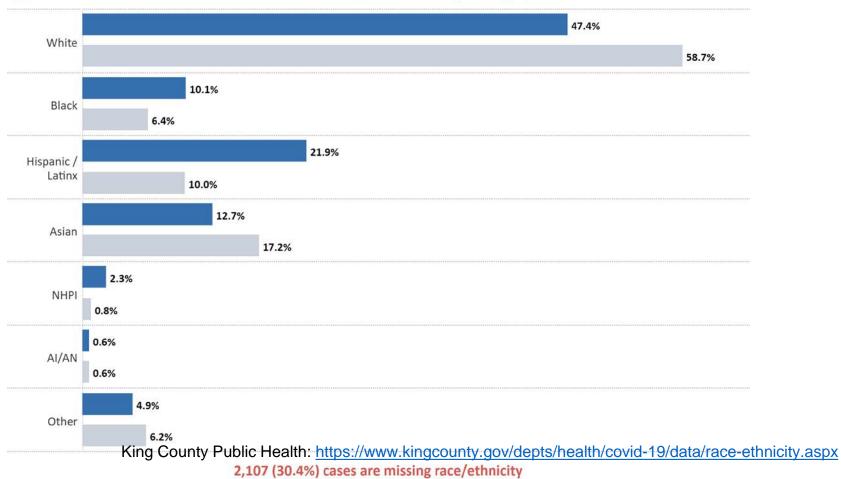




Percent by race/ethnicity compared to the 2019 King County population

Percent of cases

Percent of King County population





Public Health Seattle & King County

Total (% of Total) No

9

		reported CLI*	ĊLI
All Participants	4092	1392	2700
Sex at Birth Female Male Other Missing	2260 (55.2%) 1812 (44.3%) 2 18	767 621 0 4	1493 1191 2 14
Race and Ethnicity White, not Hispanic Hispanic or Latino, any race Asian, not Hispanic Black, not Hispanic Native Hawaiian or Pacific Islander American Indian or Alaskan Native Other or multi-racial, not Hispanic Unknown	2731 (66.7%) 239 (5.8%) 699 (17.1%) 79 (1.9%) 29 (0.7%) 19 (0.5%) 213 (5.2%) 83 (2.0%)	1038 68 169 21 6 7 59 24	1693 171 530 58 23 12 154 59
Income (last year before taxes) ≤ \$25,000 - \$50,000 > \$25,000 - \$50,000 > \$50,000 - \$75,000 > \$75,000 - \$100,000 > \$100,000 - \$125,000 > \$125,000 - \$150,000 > \$125,000 - \$150,000 Prefer not to say Don't know Missing	229 (5.6%) 388 (9.0%) 452 (11.0%) 397 (9.7%) 364 (8.9%) 1275 (31.2%) 523 (12.8%) 41 (1.0%) 1	58 105 133 142 173 140 453 176 12 0	171 263 309 310 224 224 822 347 29 1

Reported

Public Health Surveillance Program

- 44/2700 positive samples (1.6%)
- Self-selection bias not wholly ۲ representative of all King County residents
- Most with mild or no symptoms ٠

April 17, 2020

Justice as Fairness Goal: fair allocation of healthcare resources

Privileged Position

- Doctor's note for testing
- Drive-thru testing
- Restricted visitor policy difficult but understandable
- Need PPE? Buy it
- Socially distance: work from home
- Proficient in English

Underserved Position

- No/limited access to doctor
- No car for drive-thru testing
- Visitor policy excludes essential advocates
- Need PPE? may not have access to it
- Socially distance: live in close quarters & must go to work
- Limited English proficiency

Justice as Fairness

Goal: fair allocation of healthcare resources

- Address disparities during contingency planning; don't wait until crisis standards of care
 - Assertive outreach to communities who live in close quarters; essential personnel; vulnerable populations
 - Provide PPE, testing, contact tracing
 - Priority for those most in need & whose health has not been a priority in a racist/classist/ablist society
- Before crisis, **prioritize** vulnerable communities
 - May mean <u>restricting access</u> for those who can work from home, for example
 - Relinquish privilege; access not based on ability to pay, for example

The Clinical Experience of Caring for Hospitalized Patients with COVID19

Maralyssa Bann, MD

HMC Structure

- Beginning in late February/early March 2020:
 - Dedicated COVID19 acute care/ICU wards
 - Dedicated COVID19 acute care/ICU clinical teams
- Represented improvements in clinical operations that have been attempted at HMC for many years
- Had to generate new clinical protocols for testing, treatment, isolation, and discharge guidance very quickly and within a resource-constrained environment

Patients Admitted

- ~150 patients over the past 2 months
- At first, primarily patients from nursing facilities
- Over time, shifts in patterns
 - Individuals not initially tested but with a family member positive
 - Individuals working essential jobs
 - High percentage of individuals with LEP or preferred language other than English
 - Disproportionate number of individuals of racial and ethnic minority populations

Concerns/ Dilemmas Raised



"Can my family member/loved one get tested?"



"How do I keep my family safe when I discharge home?"



"I need to go back to work."



"I'm afraid of going to a nursing facility."

Communication and Patient Support Challenges

Visitor Policy

Translation Technology

Family/Advocate Communication

Inequities in COVID-19 Infection

Martine Pierre-Louis, MPH

- Increasing national attention to inequities in racial and ethnic in COVID-19 infection
- Concern amongst providers about potential inequities by language
 - Multigenerational households
 - Essential Workers
- One day summary of inpatient admissions raised concern about hospitalized patients at Harborview



UW Medicine Test Results and Race

Test Result	Overall	American Indian/Alaska Native	Asian	Black	Native Hawaii/Other Pacific Islander	Unknown	White
	%	%	%	%	%	%	%
	n	n	n	n	n	n	n
Positive	8.8	5.4	10.5	9.7	14.4	10	8.1
	1023	7	109	101	14	216	564
Negative	91.2	94.5	89.5	90.3	86	90	91
	10569	122	933	946	86	1936	6406
Total	11592	129	1042	1047	100	2152	6970

UW Medicine Data: 4/13/2020

UW Medicine Test Results and Ethnicity

Test Result	Overall	Hispanic or Latino	Non-Hispanic or Latino	Unknown
	%	%	%	%
	n	n	n	n
Positive	8.8	17	8	9.4
	1023	126	682	215
Negative	91.2	83	92	90.6
	10569	615	7869	2075
Total	11592	741	8561	2290

UW Medicine Data: 4/13/2020

UW Medicine Test Results and Language

Test Result	Overall	English	Language Other than English	Unknown %
	% n	% n	% n	n
Positive	8.8 1023	7.7 826	25.5 172	10.5 26
Negative	91.2 10569	92.3 9892	74.5 503	89.5 221
Total	11592	10718	675	247

UW Medicine Data: 4/13/2020

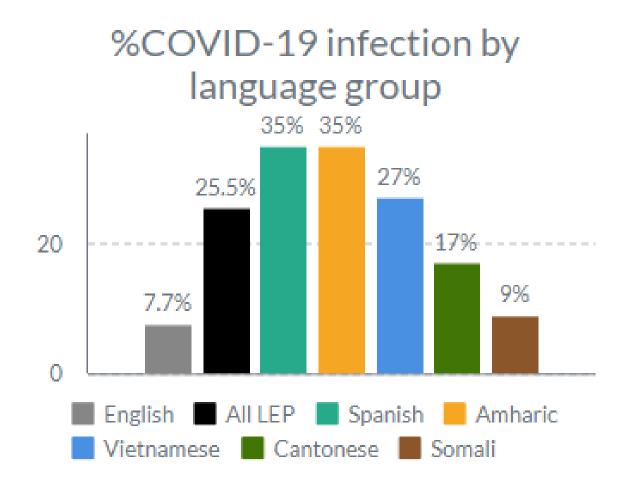
Summary of Language Data

91.9% of those tested prefer English

5.9% of those tested prefer language other than English

Language	Number Tested	% Positive within language group
All other	162	15
Amharic	46	35
Cantonese	24	17
English	11840	7
Mandarin	47	4
Russian	29	24
Somali	33	9
Spanish	283	35
Tigrinya	28	21
Unavailable	268	12
Vietnamese	74	27

*58 excluded due to sample <20 Total tests as of April 16, 2020: 12,874



UW Medicine Data: 4/16/2020

Data Limitations

- The low rates of screening among LEP patients likely impacting these results
 - LEP families may have less access to testing, hence only receiving testing when individuals have more serious symptoms
 - 5.7% of those tested were LEP, however the proportion of individuals in King County who are LEP is closer to 10.7% (2014)
 - => More screening of LEP communities is needed
- Collection of LEP status is not standardized
- These results only reflect UW medicine does not capture outlying communities served by other health groups (Kaiser Permanente, Public Health/ SKC, etc)
- Race data does not reflect underlying vulnerabilities accurately – e.g. 'Asian' category