



Interim Guidance on Ebola-related Hospital Preparedness

Issued February 9, 2015

The Oregon Health Authority's Public Health Division would like to provide the following information and documents to health system partners regarding hospitals receiving persons with possible Ebola Virus Disease. This document outlines CDC's hospital tiering strategy, identifies Oregon facilities and provides planning documents for hospitals. This is an update from the guidance previously issued on December 11, 2014.

The following documents are not intended to establish mandatory requirements or state standards. It is anticipated that individuals at risk of developing Ebola will have been previously identified on arrival into the United States and promptly become persons under monitoring (PUMs) by the local public health department. Upon developing symptoms compatible with Ebola, such persons will have been instructed to contact the local public health department, which would arrange for safe, controlled transport by EMS to the appropriate hospital. Nevertheless, it is possible that an individual may "drop in" to a hospital or another healthcare setting, and such a situation is accounted for in the attached guidance from CDC.

Hospital Tiering Strategy and Oregon facilities

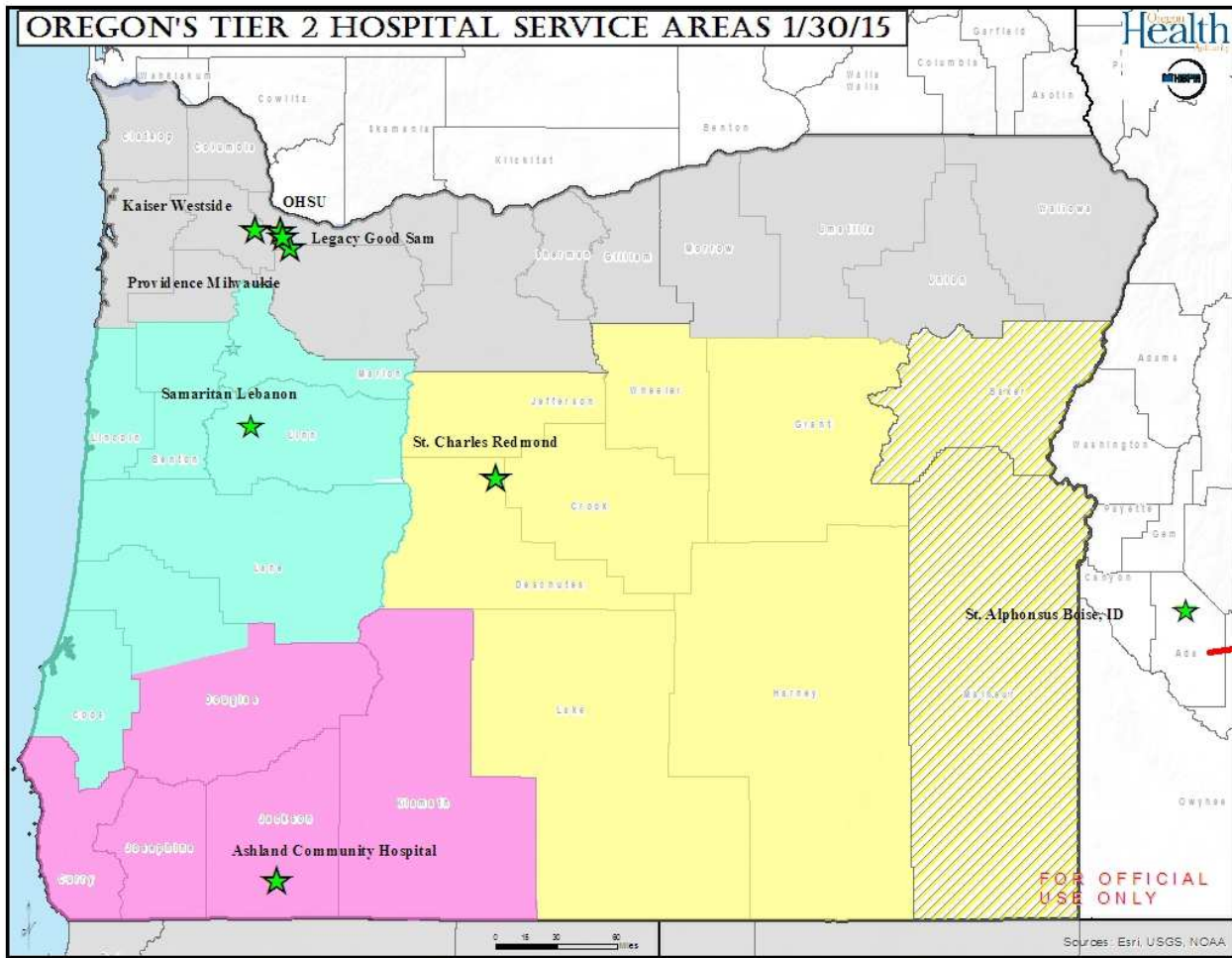
The U.S. Centers for Disease Control & Prevention (CDC) has established a three-tiered system of hospitals that aligns with guidance previously provided by the Oregon Health Authority's Public Health Division. The tiering strategy creates a coordinated network of healthcare facilities that are well prepared to deal with Ebola. The strategy assumes that every acute care facility has some role to play, but roles are different by facility based on whether they are considered a treatment center, assessment, or frontline facility. Outlined below are the three tiers, expectations for each facility and identification of facilities in Oregon.

- **Ebola Tier 1: Ebola Treatment Centers.** These facilities will treat a patient throughout the course of the disease. Treatment facilities are required to have a visit from a CDC Rapid Ebola Preparedness (REP) team in order to be identified as such. The objective of the REP team visit is to perform an initial assessment of preparedness to identify gaps and provide technical assistance in filling those gaps. It is not a certification process. The REP teams prioritize visits based on location (areas with enhanced entry screening, areas with higher exposure risk, and areas with a high volume of returning travelers). In Oregon there are currently no hospitals in this category.
- **Ebola Tier 2: Ebola Assessment Hospitals.** These facilities will initiate laboratory testing and evaluate and care for a patient for up to 96 hours, or until discharge or transfer based on test results. Tier 2 Hospitals should have isolation facilities that allow safe, effective care for a person under investigation, direct-care staff with rigorous training in appropriate infection control precautions and use of required personal protective equipment, the ability to handle

necessary laboratory testing, and the ability to maintain a four to five day supply of personal protective equipment required for care of an Ebola patient (<http://www.cdc.gov/vhf/ebola/healthcare-us/ppe/guidance.html>). In Oregon, there are seven hospitals in this category. (See Figure 1 for map of hospitals.)

- Good Samaritan Medical Center, Portland (Legacy Health)
 - Providence Milwaukie Hospital (Providence Health & Services)
 - Asante Ashland Community Hospital (Asante)
 - St. Charles Redmond (St. Charles Health System)
 - Oregon Health and Sciences University, Portland (OHSU)
 - Kaiser Westside Medical Center, Hillsboro (Kaiser Permanente Northwest)
 - Samaritan Lebanon Community Hospital, Lebanon (Samaritan Health Services partnering with Peace Health System)
- Ebola Tier 3: Frontline Healthcare Facilities. These facilities will assess, isolate and monitor a patient for approximately 24 hours, when transport will then occur to a designated Tier 2 Assessment Hospital in consultation with the state and local public health department. CDC recommends routine use of surgical mask with face shield, impermeable gown, and two pairs of impermeable gloves when caring for patients who might have early Ebola infection (e.g., fever), but are not vomiting nor having diarrhea (<http://www.cdc.gov/vhf/ebola/healthcare-us/emergency-services/emergency-departments.html>). Decisions regarding additional levels of personal protective equipment should be based on the clinical status of the patient (<http://www.cdc.gov/vhf/ebola/healthcare-us/ppe/guidance.html>). Tier 3 facilities should consider reviewing infection control procedures, ensuring that they have an adequate stock of personal protective equipment to meet ongoing needs, and may want to consider acquiring full Ebola personal protective equipment as outlined in <http://www.cdc.gov/vhf/ebola/healthcare-us/ppe/guidance.html> and training staff in its use. Frontline hospitals may initiate testing of low-risk individuals, after consultation with the state and local public health department. In Oregon, all hospitals that are not a Tier 2 Assessment Hospital fall into this category.

Figure 1. Map of Oregon Tier 2 Ebola Assessment Hospitals

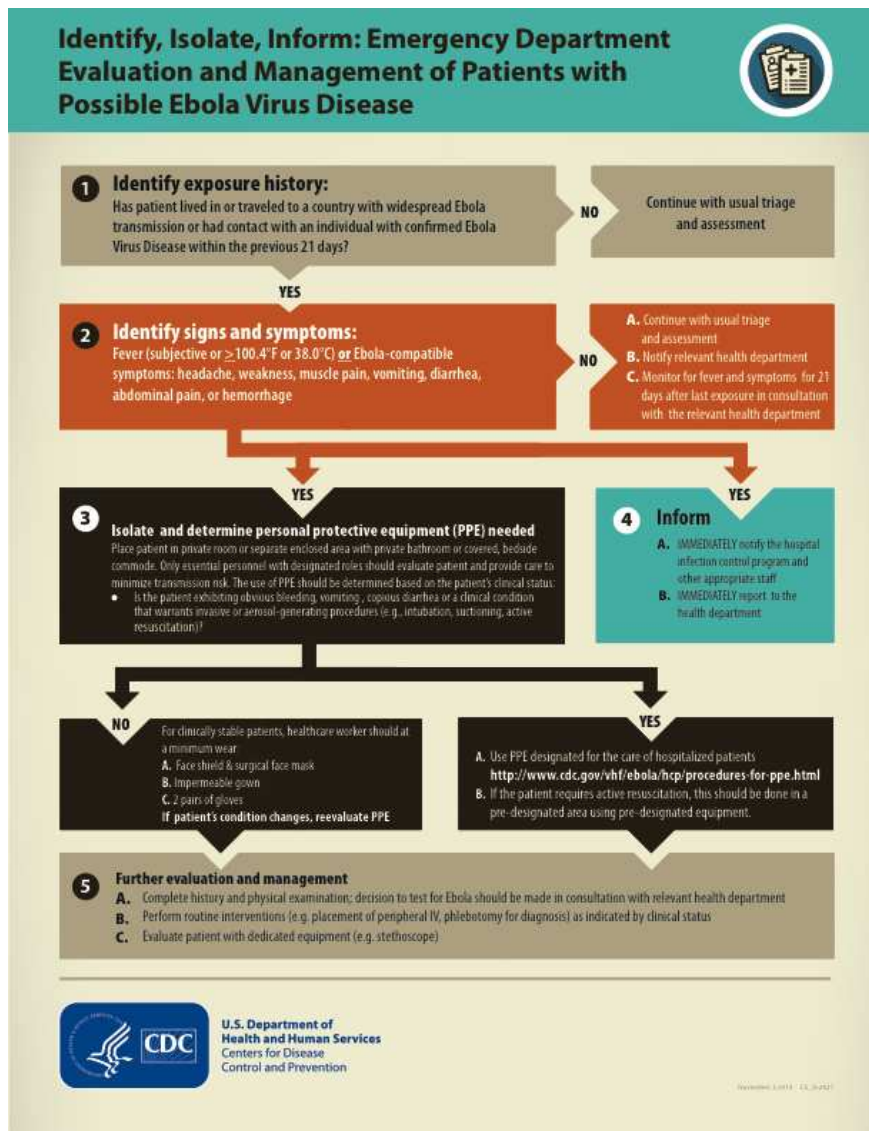


CDC Guidance documents

The CDC Guidance documents are included in this packet and are available online at healthoregon.org/ebola. Click on [Ebola Information for Healthcare and Public health partners](#). Direct links to the documents are provided below.

CDC Document 1: [Identify, Isolate and Inform: Emergency Department Evaluation and Management of Patients with Possible Ebola Virus Disease](#)

This is an algorithm designed to help with identification and isolation of patients with possible Ebola Virus Disease in emergency departments. Details are available at: <http://www.cdc.gov/vhf/ebola/healthcare-us/emergency-services/emergency-departments.html>.

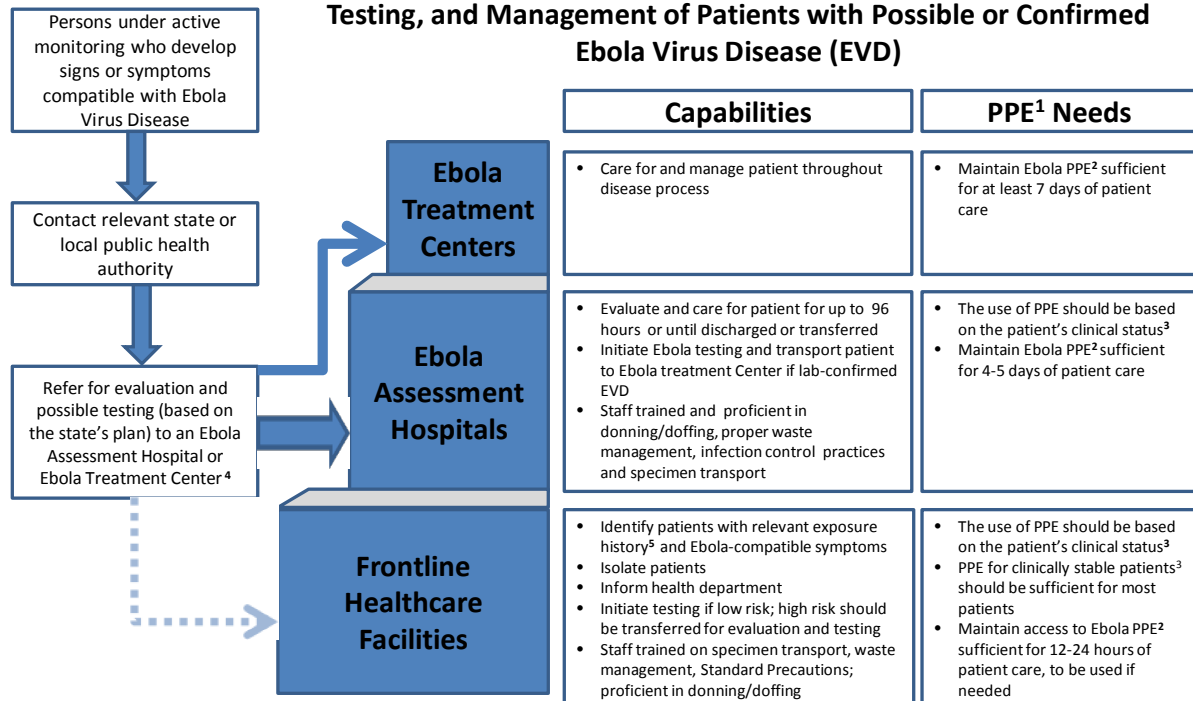


CDC Document 2: [Interim Guidance for Hospital Preparedness](#)

This document outlines capabilities and PPE needs for Ebola treatment, assessment, and care of patients under investigation at Tier 1, Tier 2, and Tier 3 healthcare facilities.

Details are available at: <http://www.cdc.gov/vhf/ebola/healthcare-us/preparing/index.html>.

Interim Guidance for Hospital Preparedness for Evaluation, Testing, and Management of Patients with Possible or Confirmed Ebola Virus Disease (EVD)



¹ Personal protective equipment (PPE)
² See <http://www.cdc.gov/ehp/ehp/hcp/procedures/caps.html> for information on recommended personal protective equipment (PPE) for all healthcare workers entering the room of a patient hospitalized with Ebola Virus Disease (EVD). All staff who may be required to use Ebola PPE should be trained for their roles and demonstrate proficiency in putting on (donning) and taking off (doffing) of PPE
³ Follow Emergency Department Algorithm for guidance on PPE <http://www.cdc.gov/ehp/ehp/gdf/ed/algorithm/management/patient/possible/ebola.pdf>
⁴ Patients should be preferentially referred to an Assessment Hospital for testing and evaluation. If severely ill and/or high clinical suspicion of EVD referral to an Ebola Treatment Center could be considered, based on the state's plan. Confirmed EVD patients should be transferred to an Ebola Treatment Center. Rarely, patients may be temporarily referred to Frontline Healthcare Facilities when it is not feasible to refer to an Assessment Hospital or Treatment Center (e.g. based on distance, bed availability, or other considerations). In some cases, a hospital may be prepared to serve in more than one role.
⁵ Patient has lived in or traveled to a country with widespread Ebola transmission or a country that has had cases in urban settings with uncertain control measures or had contact with an individual with confirmed EVD within the previous 21 days <http://www.cdc.gov/ehp/ehp/exposure/risk/factor/when/evaluating/person/caps/exposure.html>.

OHA Hospital Preparedness Guidance Documents

In November 2014, OHA outlined the “Ebola Continuum of Care State & Local Planning and Response Updates.” [Webinar slides](#) and a [hospital preparedness checklist](#) are available online at healthoregon.org/ebola. Click on [Ebola Information for Healthcare and Public health partners](#).

Update LogFeb. 9, 2015 – Map of Tier 2 Facilities updated. Clarification of infection control recommendations for Tier 3 facilities.

Original Dec. 11, 2014