

## Kansas Crisis Standards of Care: Phase II Questionnaires for Focus Group and Interviews

*Note: The questions were updated based on the feedback from CAB and TAP.*

### **Questionnaire #1. Hospitals**

*For the purposes of this focus group, we will use the term 'rationing of care' to describe the process of prioritizing the allocation of medical resources during a crisis. The aim of rationing is to ensure that everyone receives some level of care, even if they may not receive the same level of access to medical resources such as beds, ventilators, and nurses as they would in the absence of a crisis. Additionally, the term 'medical resources' will be used to describe critical items that may become scarce during a crisis, including staff, supplies such as beds, medication, PPE, and ventilators, facilities, and health care services.*

*Finally, we will also use the term 'load balancing,' which refers to the process of hospitals across the state partnering to ensure that no one hospital is overwhelmed while others have beds and staff available.*

#### **Section A: Resource Load Balancing**

*First, we will ask a few questions about resource load balancing. Resource load balancing at hospitals refers to the process of managing and distributing the patient load and resources, such as staff, medical supplies, and equipment, across different hospitals and healthcare facilities. Specifically, we will discuss factors to be considered when distributing patient loads and communication strategies between healthcare facilities.*

1. What should hospitals consider as they make decisions regarding how to implement resource load balancing?
2. When hospitals need to **transfer patients between hospitals**, what factors should be considered and why?
  - a. **Sub question:** From the factors you have described, which ones are the top priorities and why? **Prompt:** (e.g., availability of beds and other resources, the proximity of hospitals to long-term care facility, the specialization of the hospital, the needs of the patient)
3. When patients need to be **transferred between hospitals**, what are some ways to ensure that their medical needs are being met?
4. What are the potential risks and challenges associated with **transferring patients between hospitals** during a crisis. How can these issues be minimized?
5. What are the communication strategies that should be in place **between hospitals** to ensure a smooth and safe transfer process?

6. What considerations, if any, would be different **when transferring patients between hospitals and long-term care facilities?**
7. What are your thoughts about using a centralized data and communication system to manage and distribute workloads across hospitals?
8. How can best practices and lessons learned from previous crises or emergencies be applied to the transfer process during future events?

### **Section B: Impact of Shortage of Medical Resources on Hospitals and Long-Term Care Facilities**

*Next, we will explore the impact of medical care rationing by hospitals on long-term care facilities, including nursing homes and assisted living facilities. The questions aim to identify the concerns of stakeholders and determine effective strategies for addressing potential medical care shortages during crises.*

9. How should long-term care facilities such as nursing homes and assisted living facilities find out if their local hospitals are facing shortages and need to ration care?
10. If hospitals had to ration medical care for patients, what would worry you the most?
11. How would rationing of care by hospitals impact nursing homes or assisted living facilities?
12. If residents of nursing homes or assisted living facilities need hospital services while hospitals are rationing care, what are the best ways to address their needs?
13. Which residents in long-term care facilities would be at greatest risk of having unmet medical needs when care is being rationed by hospitals?

### **Section C: Support System**

*The purpose of these questions is to explore strategies for increasing awareness and improving communication related to crisis standards of care guidance at the state and federal level, particularly as it pertains to allocating medical resources during a crisis.*

14. What support should the state provide in order to consistently inform long-term facilities about state and federal crisis standards of care guidance?
15. What are some potential strategies to increase awareness of how to implement the Kansas Crisis Standards of Care Guidance in development regarding how to allocate medical resources during crisis?

## **Questionnaire #2. Long-Term Care Facilities**

### **Section A: Impact of Shortage of Medical Resources on Hospitals and Long-Term Care Facilities**

*First, we will explore the impact of medical care rationing by hospitals on long-term care (LTC) facilities, including nursing homes and assisted living facilities.*

1. If hospitals had to ration medical care for patients, what would worry you the most?
2. How should LTC facilities such as nursing homes and assisted living facilities find out if their local hospitals are facing shortages and need to ration care?
3. How would rationing of care by hospitals impact nursing homes or assisted living facilities?
4. If residents of nursing homes or assisted living facilities need hospital services while hospitals are rationing care, what are the best ways to address their needs?
5. When care is being rationed by hospitals, which residents in LTC facilities would be at greatest risk of having unmet medical needs?

*Long-term care facilities would also experience a shortage of resources, including medical resources during crisis. Next, we will ask you a few questions about potential impacts of a shortage on LTC facilities.*

6. When resources are limited, such as equipment, supplies, and personnel needed to provide care to residents, what would be the impact on your LTC facility?
7. When resources are limited in LTCs, what do you think would be the best way to decide what residents get what resources and when?
8. When care is being rationed at LTC facilities, what are the best ways to address the needs of residents?
9. When care is being rationed at LTC facilities, which would be at greatest risk of having unmet medical needs? What strategies can be implemented to address their needs?

### **Section B: Resource Load Balancing**

*Next, we will ask a few questions about resource load balancing. Specifically, we will discuss factors to be considered when distributing patient loads and communication strategies between healthcare facilities.*

10. If LTC facilities have to ration care, how should they adjust their operations such as staffing or services to meet the needs of residents?  
**Sub question:** What challenges, if any, do you anticipate LTCs would encounter when making these adjustments?
11. When care is being rationed at LTCs, what strategies can be implemented to obtain the staffing necessary to maximize quality of care?

12. When residents need to be **transferred between hospitals and long-term care facilities**, what are some ways to ensure that the medical needs of the residents are being met?
13. What are the potential risks and challenges associated with **transferring residents between hospitals and long-term care** facilities during a crisis. How can these issues be minimized?
14. How can technology be used to facilitate the transfer process and ensure that the appropriate medical information is available to healthcare providers?
15. What are the communication strategies that should be in place **between hospitals and long-term care facilities** to ensure a smooth and safe transfer process?
  - a. **Sub question:** What considerations, if any, would be different when transferring patients between **long-term care facilities**?
16. How can family members and caregivers be involved in the decision-making process and the transfer process to ensure the well-being of the resident?
17. How can best practices and lessons learned from previous crises or emergencies be applied to the transfer process during future event?

### **Section C: Support System**

*The purpose of these questions is to explore strategies for increasing awareness and improving communication related to crisis standards of care guidance at the state and federal level, particularly as it pertains to allocating medical resources during a crisis.*

16. What support should the state provide in order to consistently inform long-term facilities about state and federal crisis standards of care guidance?
17. What are some potential strategies to increase awareness of how to implement the Kansas Crisis Standards of Care Guidance in development regarding how to allocate medical resources during crisis?

### **Questionnaire #3. Consumer Advocacy Groups**

1. As a consumer advocate for caregivers, what measures can be taken to ensure that long-term care facilities have adequate resources to care for their residents during a crisis?
2. In your experience working with caregivers of loved ones in long-term care facilities, what are some common challenges they face during a crisis, and how can these challenges be addressed?
3. How can long-term care facilities communicate effectively with caregivers during a crisis, and what information should be provided to them to help them support their loved ones?
4. When residents need to be **transferred between hospitals and long-term care facilities**, and what can be done to ensure that their medical needs are being met?

- 4.1. What communication strategies should be in place **between hospitals and long-term care facilities** to ensure a smooth and safe transfer process during a crisis?
5. What are the potential risks and challenges associated with transferring residents **between hospitals and long-term care facilities** during a crisis, and how can these issues be minimized?
  - a. **Sub question:** What considerations, if any, would be different when transferring patients between **long-term care facilities**?
6. In a crisis situation where resources are limited, how can caregivers be included in the decision-making process regarding resource allocation in long-term care facilities?
7. How can long-term care facilities work with regulatory agencies and other stakeholders to develop contingency plans for crisis situations, including strategies for managing limited resources?
8. What role can consumer advocates play in ensuring that the needs of caregivers and their loved ones are met during a crisis in long-term care facilities?
9. What policy changes or improvements can be made to support caregivers and ensure the quality of care in long-term care facilities during a crisis?
10. How can technology be utilized to support caregivers and their loved ones in long-term care facilities during a crisis, particularly in situations where physical visits may be limited or restricted?
11. As a consumer advocate for caregivers, what resources or support services can be provided to them to help them cope with the emotional and psychological impact of a crisis on their loved ones in long-term care facilities?
12. What other concerns or suggestions do you have as a consumer advocate for caregivers of loved ones in long-term care facilities during a crisis?

## Questionnaire #4. Caregivers

### Questionnaire #3

*For the purposes of this focus group, the term caregiver will refer to family members or friends in Kansas who have provided care or support for a loved one in a nursing home or assisted living facility at some point in the past two years.*

*Additionally, the term 'resources' will be used to describe critical items that long-term care facilities may experience shortages of during a crisis. These resources may include personal protective equipment, medical equipment and supplies, staffing, food and other daily living supplies, and physical space.*

1. What would worry you the most during a crisis, like a pandemic or a catastrophic public health event, when your loved one is in a long-term care facility?
2. If a long-term care facility is operating during a crisis, what specific problems or difficulties do you think you might face as a caregiver?

3. What are some good ways for long-term care facilities to let caregivers know about their operations during a crisis and how these changes will affect their loved ones?
4. What kind of information do caregivers need to receive from their long-term care facility to support their loved ones during a crisis?
5. When there are not enough resources, what do you think is the best way to decide which residents get available resources and when?
6. When there are not enough resources at LTC facilities, which residents would be at greatest risk of having unmet needs?
7. What strategies can be implemented to address their needs?

*During a crisis, there might not be the enough resources available and long-term care facilities will need to “ration” their use. The aim of rationing is to ensure that everyone receives some level of care, even if they may not receive the same level of access to medical resources such as beds, ventilators, and nurses as they would in the absence of a crisis. This applies not only to long-term care facilities but also to other medical facilities.*

8. What can be done to make sure there are enough staff to give good care to residents during a crisis when resources are limited?
9. When long-term care facilities need to move a patient to a different facility, what things should they consider so that they can make the best decisions for a resident?
10. What can be done to involve caregivers in the decision-making regarding the transfer process to make sure that the residents are taken care of?
11. Do you have any ideas for how long-term care facilities can manage limited resources so that they can give good care to all of their residents?
12. Do you have any other thoughts about this topic?