The Director of the Idaho Department of Health and Welfare (the “Department”) is authorized by Idaho Code § 56-1003(3) to exercise general supervision and promotion and protection of the health of Idahoans. Further, pursuant to its authority under Idaho Code § 56-1003(2), the Idaho Board of Health and Welfare approved the Crisis Standards of Care for Health Care Entities contained in IDAPA 16.02.09.

Crisis standards of care provide guidelines that help healthcare providers and systems decide how to deliver the best care possible under the extraordinary circumstances of an overwhelming disaster or public health emergency. The guidelines are used when there are not enough healthcare resources to provide the usual standard of care to people who need it. The goal of crisis standards of care is to extend care to as many patients as possible and save as many lives as possible.

Implementation of crisis standards of care (CSC) are meant to be a measure of last resort. Activation of the crisis standards of care means that all other options for addressing resource limitations have been explored.

The following conditions exist which support activating CSC:

Idaho COVID-19 hospitalizations, largely of unvaccinated individuals, continues to climb to record levels. The massive surge of COVID-19 patients has exhausted the supply of staff, available beds and necessary resources to adequately address the increased demand for healthcare services.

The Crisis Standard of Care Activation Committee (the “Committee”) convened on September 6, 2021 and recommended the activation of CSC in the Panhandle and Northern Central Health Districts (Districts 1 and 2) based on a request from Kootenai Health. Subsequently, CSC was activated on September 6, 2021 for Districts 1 and 2.

On September 15, 2021, St. Luke’s Health System (SLHS), the largest healthcare system in the state, requested the activation of CSC in accordance with IDAPA 16.02.09. SLHS reported a record 281 COVID-19 patients of which represents more than 50% of their 475 staffed adult beds. SLHS has opened 93 beds in non-traditional overflow areas. SLHS reported they had run out of physical beds and would be treating patients on stretchers until the additional beds they have ordered arrive. SLHS reported that of their 71 occupied ICU beds, 58 were COVID-19 patients. And of their 71 ICU patients, 63 were on ventilators. They further reported that all traditional ventilators were in use and that they were now using non-traditional ventilators such as pediatric ventilators for adults. Given the capacity constraints, SLHS is now treating some patients in traditional beds that would normally be in an ICU bed. SLHS had previously cancelled “green” surgeries and on September 15th canceled “yellow” surgeries which include removal of low risk cancers, fractures with pain and hernia repairs. Despite taking all necessary measures to prevent CSC, SLHS reported lack of adequate resources to treat not only COVID-19 patients but also other medical condition that may require hospitalization. The SLHS COVID-19 patient forecast indicates that in two weeks, SLHS could have 425 COVID-19 patients, meaning that almost every bed at SLHS would be occupied by a COVID-19 patient at that point.
The Committee convened virtually on September 15, 2021 and recommended to extend activation of CSC statewide.

Therefore, pursuant to IDAPA 16.02.09:

1. Crisis Standards of Care are activated statewide.
2. Healthcare entities may implement CSC as needed and in accordance to their own CSC policies.
3. Affected healthcare entities are recommended to consult with the guidance on Crisis Standard of Care Plan and the Patient Care Strategies for Scarce Resource Situations, both of which are housed on the state’s COVID-19 website, www.coronavirus.idaho.gov/idaho-resources/.
4. The Department and the Idaho Office of Emergency Management will continue to work closely with healthcare entities that have implemented crisis standards of care to receive resource requests and continue to pursue all options for obtaining those resources as urgently as possible.

IT IS SO DECLARED:

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DAVE JEPPESEN, DIRECTOR
IDAHO DEPARTMENT OF HEALTH AND WELFARE