

The Commonwealth of Massachusetts

Executive Office of Health and Human Services Department of Public Health 250 Washington Street, Boston, MA 02108-4619

CHARLES D. BAKER Governor

KARYN E. POLITO Lieutenant Governor MARYLOU SUDDERS Secretary

MARGRET R. COOKE Commissioner

> Tel: 617-624-6000 www.mass.gov/dph

Memorandum

TO: Hospital Chief Executive Officers

Hospital Chief Medical Officers Hospital Chief Nursing Officers

FROM: Estevan Garcia MD, DrPH, MPA, FAAP, Chief Medical Officer

Elizabeth Daake Kelley, MPH, MBA, Director, Bureau of Health Care Safety and

Quality

SUBJECT: Guidance on Management of Pediatric Respiratory Illness Patients during times of

Capacity Constraints

DATE: October 31, 2022

The Massachusetts Department of Public Health (DPH) continues to appreciate the essential role you have in supporting high-quality care amid health care delivery constraints. In recent weeks, Massachusetts has faced significant pediatric inpatient capacity constraints, particularly in pediatric intensive care units (PICUs). DPH has developed this guidance document to provide hospitals with strategies designed to maximize pediatric capacity and to ensure pediatric patients are safely cared for in the most appropriate setting. Hospitals should review the recommendations and work to implement them within their organizations:

Bed Capacity

- All hospitals caring for pediatric patients should continue to follow the Health and Medical Coordinating Coalition (HMCC) <u>capacity planning and response model</u> for reporting bed capacity and needs. Once hospitals have optimized internal capacity coordination but remain in need of inpatient beds, the framework can be used to request local/regional support for transfer of patients, followed by state support. DPH has developed a dashboard that provides daily updates to pediatric bed capacity across the state and has potential to provide near real-time updates. This is accessible to all hospitals via DPH's WebEOC platform, within the COVID19 Hospital Data Collection Board as a separate tab. For assistance with your hospital's WebEOC login information please contact your emergency preparedness coordinator or email dph.webeoc@mass.gov. WebEOC is accessed here: https://mdph.webeocasp.com/mdph/
- All hospitals with licensed pediatric beds must maximize staffing of these beds including those not in
 use but not decertified. Hospitals should consider utilizing short-term agency or travel nurse contracts
 to support staffing.
- Some younger pediatric patients may be appropriately admitted to a neonatal intensive care unit (NICU) for management. NICUs within each healthcare organization should assess their internal

- capacity to admit patients from emergency departments or inpatient setting for respiratory support if there is isolation space available for these patients and communicate availability to provider partners.
- Hospitals, in accordance with 105 CMR 130.700, may admit patients who are fifteen years and older
 to the general med/surgical unit setting provided that pediatric expertise is available for consult. DPH
 requests hospitals also consider admission of these older teens to general ICU settings, when
 appropriate.
- Hospitals should retrotransfer patients from PICUs and/or other higher levels of care to their community hospital when appropriate to optimize referring PICU capacity.
- DPH expects individual hospitals will optimize capacity by reviewing procedural activities considering inpatient demand within both pediatric inpatient units and PICUs.
- Hospitals with pediatric behavioral health inpatient beds should exhaust all staffing possibilities to staff all beds and maximize capacity.

Clinical Management

- Hospitals that care for admitted pediatric patients with or without PICU capacity should implement an inpatient high flow nasal cannula oxygen protocol so that they may safely manage patients in a floor setting. In addition, all general emergency departments are expected to develop and implement high flow nasal cannula oxygen capacity for pediatric patients requiring such support. The attached pathway was developed and shared by Dr. Alla Smith for use in the community hospital setting without a PICU. This pathway was implemented at South Shore Hospital. See pathway
- Boston Children's Hospital has staffed a 24/7 PICU consultative phone service available to emergency departments and inpatient settings across the state. The number to contact a consultant to assist in clinical management decisions and potential placement is **617-355-2170**.
- DPH encourages all pediatric hospitals with pediatric expertise to develop a teleconsulting service to support their referring hospitals in management of pediatric emergency department and inpatient care. Each hospital should work with their local leadership to review appropriate technology for these consults.

DPH recognizes and appreciates the ongoing efforts by hospitals with pediatric services to assist with capacity management and situational awareness of constraints across the Commonwealth. DPH will continue to support these and other efforts as we work together to ensure that pediatric patients have access to high-quality care. If you have any questions regarding this guidance then please contact dph.bhcsq@mass.gov