

GOVERNOR JARED POLIS

#DoingMyPartCO



KNOCK THE RO TO BELOW 1



BUILD HEALTHCARE CAPACITY TO TREAT
THOSE THAT ARE SICK AND SAVE LIVES

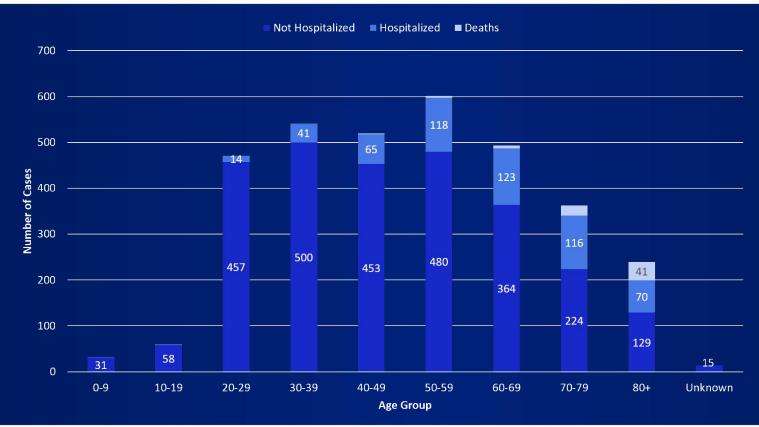


HAVE IN PLACE MASS TESTING AND CONTAINMENT PROGRAM TO EFFECTIVELY CONTAIN THE VIRUS AND RETURN TO NORMALCY





CO CASES OF COVID-19 BY AGE GROUP, HOSPITALIZATION AND OUTCOME





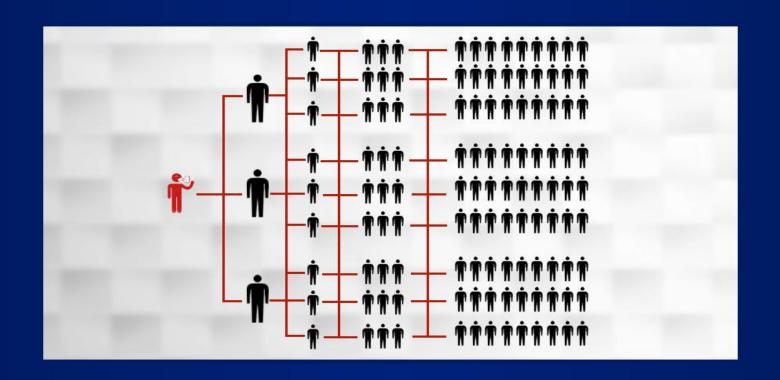


R NAUGHT VALUES (RO)

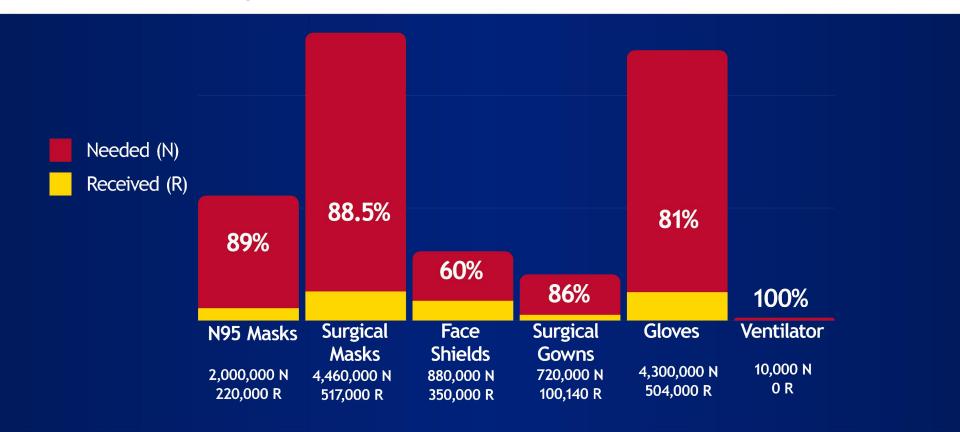
a.k.a. The number of people your positive neighbor is likely to infect

- Estimated Colorado RO was between 3 & 4
- One Coloradan spreads the virus to three to four people
- Then each one of those three or four Coloradans spreads the virus to three or four more Coloradans and so on.

COLORADO R NAUGHT VALUES (RO3)



FEDERAL REQUEST FOR PPE







STATE-SOURCED SUPPLIES

ORDERED

2,500,000 N95 MASKS 1,000,000 SURGICAL MASKS 250,000 GOWNS

25,000 FACE SHIELDS

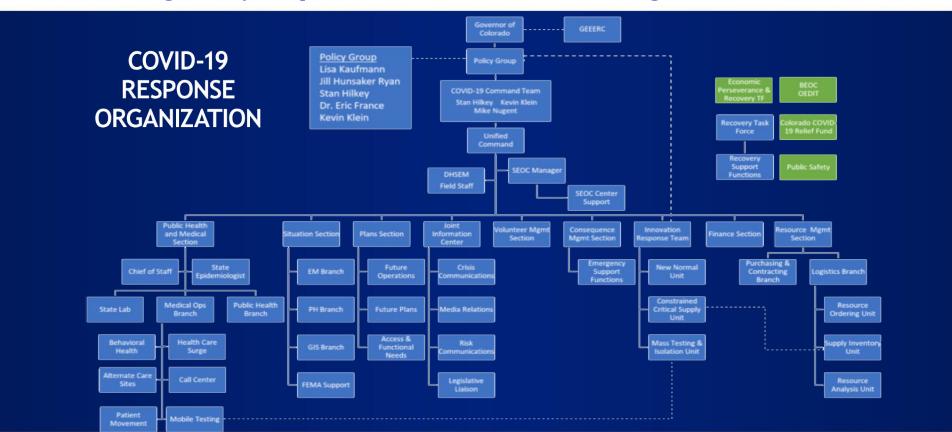
1,500,000
GLOVES

750VENTILATORS

*ORDERS PLACED, ONCE ARRIVED NEED TO TEST TO ENSURE QUALITY



Emergency Operations Center Org Chart







PUBLIC HEALTH AND MEDICAL SECTION

MISSION OF MEDICAL SURGE UNIT

The mission of the Public Health and Medical Section in the COVID-19 response is to save lives by ensuring the stability of Colorado's healthcare system and to increase capacity within that system



KEY OPERATING ASSUMPTIONS

- Healthcare institutions across the state have been preparing for COVID-19 for many months and have taken steps to increase internal capacity
- 2. Healthcare systems will work within their normal patterns until they are overwhelmed
- 3. The role of the state is to:
 - a. Support healthcare systems with coordinated access to private sector resources to acquire PPE, ventilators, and other equipment
 - b. Coordinate the recruitment and utilization of volunteer medical professionals to provide surge capacity within the healthcare system
 - c. Provide information on the status of the healthcare system
 - d. Create systems that overlay the normal healthcare system to provide coordination and response when the healthcare system becomes overwhelmed



OUR OPERATING CHALLENGE



Based on epidemiological models, and depending on the effectiveness of social distancing, Colorado can expect to see a surge of patients that will **overwhelm hospitals** between April and July 2020.



Based on clinical evidence from areas previously hit with the COVID-19 outbreaks, patients who are severely ill will require intensive care and will be **ventilator dependent for an average of 11 to 20 days**



MEDICAL SURGE CONCEPT OF OPERATIONS

TIER 1

Critical Care Patients
Ventilator, Dialysis,
ICU needs

Facility Types:

Hospitals, Critical
Access Hospitals,
Long-term acute care
facility

TIER 2

Acute Care Patients

IV meds or fluids, Hourly RN monitoring, Respiratory Therapy needs

Facility Types:

Ambulatory Surgical Centers, Freestanding Emergency Departments, Critical Access Hospitals

TIER 3

Sub-Acute Care Patients

Daily MD monitoring, 2x Daily RN,monitoring, Respiratory Therapy needs

Facility Types:

Arenas, Conv. Centers, Stadiums, Warehouses Converted to Field Hospitals

TIER 4

Non-acute care patients

Asymptomatic persons needing quarantine and/or basic supervision, may include homeless

Facility Types:

Hotels, Dorms, Skilled Nursing Facilities, other Lodging Facilities

Target: 5,000 beds by April 18

Using Current Capability

Target: 2,000 beds by April 18

Target: 10,000 beds by May 15

WILDLY IMPORTANT GOALS (WIG)

- Increase the total number of Tier 1 critical care beds in Colorado from 1,849 to 5,000 by April 18, 2020
- Increase the total number of subacute Tier 3 surge beds in Colorado from 0 to 2,000 by April 18, 2020
- Increase the total number of non-acute Tier 4 surge beds from 0 to 10,000 by May 15, 2020
- Create and implement a patient transport unit within the Public Health and Medical Division by April 10, 2020
- Increase the completeness of EMResource data from 62% to 90% by April 18, 2020





WE'RE ALL IN THIS TOGETHER