

Resourcing—Communication Guidance for the Allocation Team

When resources are limited, and the medical system is forced to make resource allocation decisions.

Deliver the Serious News that a patient/loved one was not allocated Remdesivir:

Ask-Tell-Ask

1—Ask permission: *“I’m hoping to talk to you about COVID-19 and what it means for you/your loved one. Is this an okay time to talk?”*

Ask their understanding: *“Tell me more about what you have heard about the anti-viral medicine Remdesivir?”*

2—Tell: *“Would it be okay if I told you what I know?”*

“This is a very difficult time. There is a limited supply of the medicine Remdesivir both here at UPMC and across the country. An entirely different team from your/your loved one’s care team follows the state’s rules of a lottery to decide who receives this limited supply.”

“I wish I had better news. You/your loved one is not going to receive Remdesivir. We are going to continue to use all other medical treatments that we think will help you/your loved one recover from this illness.”

(Pause to allow the patient/family to absorb this information)

3—Ask what questions they have: *“What questions do you have?”*

Ask their understanding: *“It would help me to hear what you will tell your loved ones when you speak with them.”*

It is normal for people to respond emotionally when they have received serious news (It means they heard the news). This emotion often comes in the form of a question. See below for ways to respond to the emotion.

Responding to Emotion:

What they say	What you say, and why
Why can't my grandmother receive Remdesivir?	<i>This is a difficult time. We are trying to use resources in a way that is fair for everyone. Your grandmother was not selected by the lottery to receive Remdesivir. We are going to continue to use all other medical treatments that we think will help your loved one.</i>
Shouldn't I be receiving Remdesivir?	<i>This is a difficult time. We are trying to use resources in a way that is fair for everyone. You were not selected by the lottery to receive Remdesivir. We are going to continue to use all other medical treatments that we think will help you.</i>
My grandmother needs the Remdesivir! Or she is going to die!	<i>I can't imagine how scary this situation is. We will use all available medical treatment that we think will help your grandmother get better.</i>
Are you just discriminating against her because she is old?	<i>I can see how much you love her and want the best for her. Age is not considered when deciding who receives Remdesivir. Patients of all ages have an equal chance. We are using guidelines that were developed by people in this community to prepare for a situation like this. The state guidelines that we are following have been developed by groups outside of UPMC, including health care professionals, ethics experts, and patient representatives while considering all options.</i>

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Adapted using work from VitalTalk

Additional Resources: <https://www.vitaltalk.org/guides/covid-19-communication-skills/> and <https://www.capc.org/blog/capc-releases-covid-19-response-resources-toolkit/>

<p>You're treating us differently because of the color of our skin.</p>	<p><i>I can't imagine the negative experiences you have had in the past with health care simply because of who you are. That is not fair, and I do not want people to be treated by the color of their skin.</i></p> <p><i>The situation today is that there is not enough of the medicine. We are using guidelines that were developed by people in this community, including people of color, so that we can be fair. Race, ethnicity, disability, and age are not known by the team making the decisions.</i></p>
<p>It sounds like you are rationing.</p>	<p><i>What we are doing is trying to spread out our limited amount of medication in the best way possible. The state guidelines that we are following have been developed by groups outside of UPMC, including health care professionals, ethics experts, and lay people considering all options. I wish we had more.</i></p>
<p>You're playing God. You can't do that.</p>	<p><i>All hospitals are following the same rules given by the state on how to fairly choose who gets the limited supply of Remdesivir. A lottery is the fairest way to make sure everyone is treated by the same rules. I know that we don't have enough medicine. I wish we had more.</i></p>
<p>Can't you get more medicine from somewhere else?</p>	<p><i>Right now, the hospital does not have enough Remdesivir for everyone. It is not possible for us to get more. And I can't imagine how disappointing this is to hear.</i></p>

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Frequently Asked Questions about Remdesivir for Patients and Families:

What is Remdesivir?

A medicine that is used to treat viruses. Studies show that it may be effective against COVID-19.

Is Remdesivir safe?

Yes. In 3 large studies in humans with COVID-19, the medicine did not cause serious medical problems in most patients.

Does Remdesivir cure COVID-19?

No. One study suggests that patients with COVID-19 get better more quickly (11 vs 15 days). More studies are needed to know if there are any other benefits such as decreasing the number of people who die from the virus.

Who is qualified to receive Remdesivir?

Patients who have had their first positive COVID-19 test within the past 10 days, are in the hospital, have low oxygen levels, and have pneumonia are qualified for Remdesivir. If the patient has liver or kidney failure, they are not qualified. If the patient is pregnant or less than 18 years old, the patient can receive Remdesivir through a compassionate care status instead of being included in the lottery system.

Why is there a lottery?

There is not enough Remdesivir to give to all qualified patients. A lottery is the fairest way to decide who gets the medicine.

How does the lottery work?

It works at random like other lotteries, though there are situations that influence a person's chances.

A patient has an increased chance of getting the medicine if they:

- are an essential worker (as defined by the Governor)
- come from a disadvantaged area

A patient has a decreased chance of getting the medicine if they:

- have a disease that puts them at high risk of dying in the next year

Why do essential workers get an increased chance?

Essential workers are at increased risk of getting sick at their job. Their recovery benefits the community.

Why do people who come from disadvantaged areas get increased chance?

People who live in disadvantaged neighborhoods are more likely to be exposed to, get infected with, and die of COVID-19. By giving people who live in these neighborhoods an increased

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chance of getting the medicine we are working to decrease the social unfairness of living in these areas.

Who developed the guidelines?

The guidelines were developed by ethics experts, community members, disaster medicine experts, and diversity and inclusion experts. The guidelines follow the state’s guidelines on how to make distribution decisions.

Who applies the guidelines to decide who will and will not get the medicine?

A patient’s care team is not involved. A separate group applies the guidelines to all patients who are qualified (see above) and then lets the treating care team know the result. To be as fair as possible, they will only know the 3 influencing factors discussed earlier: whether the patient is from disadvantaged areas, an essential worker, or expected to die within the next year from a chronic condition. They will not know any other information that could further influence the decision.

Can I appeal the team’s decision?

Of course. If you think the team made a mistake in how they applied the guidelines, please let your care team know. Although we are not able to change the guidelines, we want to make sure we used the framework correctly.