CRITICAL CARE SOCIETIES COLLABORATIVE (CCSC)









JOINT STATEMENT OF THE CRITICAL CARE SOCIETIES COLLABORATIVE TO THE TRUMP ADMINISTRATION, PRESIDENT-ELECT BIDEN'S COVID-19 TASKFORCE, CONGRESSIONAL LEADERSHIP & STATE GOVERNORS

DISTRIBUTION OF PERSONAL PROTECTIVE EQUIPMENT (PPE) AND ALLOCATION OF OTHER RESOURCES NOV. 16, 2020

The Critical Care Societies Collaborative, comprising the American Association of Critical-Care Nurses (AACN), American College of Chest Physicians (CHEST), the American Thoracic Society (ATS), and the Society of Critical Care Medicine (SCCM), acknowledges all efforts to address the COVID-19 pandemic through actions aimed at stemming the spread of the virus and protecting the lives of healthcare workers. The recent renewed surge in coronavirus infections, however, proves that current efforts are unable to disrupt COVID-19 transmission. Our organizations therefore reiterate our conviction that we urgently need a national plan to ensure an effective response. This plan needs to address the following three aspects of patient care and public health.

First, all health care workers providing services to patients with COVID-19 must have appropriate personal protective equipment (PPE). The efficient distribution of sufficient quantities of PPE that meet conventional safety standards is a top priority in an effective national response. Widespread and ongoing use of contingency measures to preserve PPE supplies places our healthcare workforce at unconscionable risk.

Second, the plan must address the equitable allocation of other resources. Rural hospitals, community care centers and other resource-limited settings particularly need additional support to care for patients and mitigate the pandemic's impact. Needed resources include:

- equipment, including ventilators and supplies (invasive and non-invasive) and dialysis machines and supplies needed for renal replacement therapy;
- medications to treat and support patients with severe COVID-19 infections, including the necessary medications to provide sedation, analgesia, and pharmacologic neuromuscular blockade for patients requiring mechanical ventilation;
- flu and pneumococcal vaccines;
- clinical staff with experience in critical care.

Systems to effectively allocate resources will become even more critical as a vaccine, or vaccines, to prevent COVID-19 become available, and distribution priorities emerge.

Finally, we demand an unwavering commitment to basic public health measures that effectively disrupt the transmission of the coronavirus. We urge all government leaders to contribute to a national strategy

for COVID-19 testing and contact tracing and to constantly and consistently promote community-wide mask use, social distancing and handwashing as minimum measures to control COVID-19 spread.

While we eagerly await the development and equitable, comprehensive distribution of a safe and effective vaccine, our nation must join with other countries around the world in taking immediate action. As predicted by scientific experts, the fall has seen widespread increases in disease transmission with greater social engagement and inconsistent lockdown measures. Growing numbers of COVID-19 patients, coupled with a predictable patient influx from seasonal influenza, will once again stress our health care system and the nation as a whole. We urge you to take immediate action while our members continue to lead this effort.